



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **35843** | Service: **DTV** | Call **KSTC-TV** | Channel: **30 (UHF)** |  
ID: | Sign:  
File **0000028534**  
Number:  
FRN: **0009769514** | Date **05/06**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>KSTC-TV, LLC</b> Doing Business As: KSTC-TV, LLC	David A. Jones 3415 UNIVERSITY AVENUE, WEST ST. PAUL, MN 55114 United States	+1 (651) 642-4334	djones@hbi. com	Limited Liability Company

## 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
<b>Charles Naftalin</b> <i>Legal Counsel to</i> <i>Licensee</i> <i>Holland &amp; Knight LLP</i>	Charles Naftalin 800 17th Street, NW Suite 1100 Washington, DC 20006 United States	+1 (202) 457- 7040	charles.naftalin@hklaw. 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.	Yes
Briefly describe transition plan	See Exhibit 1.

**Transmitters**

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

**Auxiliary  
Transmitter****Add Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Backup transmitter
	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DHD-20P1
	Year	2002
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	20 kW

**Auxiliary  
Transmitter****New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	UAXTE- 12R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	12 kW
	Justification for New Transmitter	See Exhibit 1.

**Auxiliary  
Transmitter****Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	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
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No

	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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  
Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
UHF inside RF system	See Exhibit 1.

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	HP140DAW
	Year	2000
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	50 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	THU9evo-48
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	73.5 kW
	Justification for New Transmitter	See Exhibit 1, August 2017 Supplement, August 26, 2019 Letter and Master Electric Company, Inc. Quote.

**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	See attached quote from Master Electrical Company, Inc.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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**  
Information not provided.



**Antennas**

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

**Auxiliary  
Antenna****Add Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Auxiliary (Backup)
	Description of Use	Currently able to assist with transition and then to transition to new channel. See Exhibit 1.
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this antenna currently shared with any other stations?	No
	Is this antenna directional?	Yes
	Is antenna in operating condition?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Is antenna located on or in close proximity to an antenna farm?	Yes
	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A

Design power capacity in use	N/A
Lower Limit	N/A
Upper Limit	N/A
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	1000.0 kW
Manufacturer	
Model	TFU-36JSMR
Year	1999

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## Auxiliary Antenna

### New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Auxiliary (Backup)
	Description of Use	To limit any disruption to broadcast services during transition. See Exhibit 1.
	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?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	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) .....	500.0 kW
Manufacturer	
Model	TFU- 24JSC- RT140
Year	2017
Justification for New Antenna	See Exhibit 1.

## Auxiliary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	8 3/16 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes

<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

## Auxiliary Antenna

### Other Antenna Cost Not Listed

Information not provided.

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Bottom
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	5
	Number of Panels	4
	Design power capacity in use	67.0 %
	Lower Limit	650.00 MHz
	Upper Limit	662.00 MHz
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1000.0 kW

Manufacturer	
Model	TAD-32UDC-5/80-MRST
Year	2010



Primary  
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Bottom
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	4
	Number of Panels/Bays	4
	Lower Limit	470.00 MHz
	Upper Limit	692.00 MHz
	Design power capacity in use	67.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	1000.0 kW
	Manufacturer	

Model	TUM-O5-16-80H-1-R-B
Year	2017
Justification for New Antenna	See Exhibit 1.

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	Yes
	Type	New
	Number of channels supported	2
	Frequencies of channels supported	Upper and lower frequency
	Frequency	54.0 MHz - 698.0 MHz
	Do you need a combiner output splitter /switcher for dual feed lines?	No
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband
	Feed Line Size	8 3/16 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	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

**Auxiliary**      **Add Transmission Line**  
**Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	To limit disruption to broadcast signal in case of loss of main antenna
	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
<b>Existing Transmission Line Manufacturer and Type</b>	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	1320 feet per run

**Auxiliary**      **New Transmission Line**  
**Transmission Line**      **Section**

	Question	Response
<b>New Transmission Line Costs</b>	Use	Auxiliary (Backup)
	Description of Use	New transmission line necessary to continue to support backup operations. See Exhibit 1.
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	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	1320 feet per run
	Justification for New Transmission Line	See Exhibit 1.

**Auxiliary**      **Other Transmission Line Expenses Not Listed**  
**Transmission Line**      **Information not provided.**

**Primary**  
**Transmission Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	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	1475 feet per run

Primary  
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	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	1475 feet per run
	Justification for New Transmission Line	See Exhibit 1.

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

**Auxiliary  
Tower**

**Add Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Auxiliary (Backup)
	Description of Use	Tower is used for established backup antenna
	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	1023882
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	45° 03' 44.0" N-
	Longitude (NAD83)	093° 08' 22.0" W-
	Overall Structure Height	1436.01 feet

	Support Structure Height	1304.12 feet
	Ground Elevation Above Mean Sea Level (AMSL)	997.04 feet
	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Telefarm, Inc.
	Date Constructed	01/01/2000

**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
36395	WUCW	DTV
42949	KNOW-FM	FM
09629	WCCO-TV	DTV
28010	KSTP-TV	DTV
23079	KARE	DTV

**Auxiliary  
Tower**

**Tower Modification Costs**

Section	Question	Response
<b>Engineering Study</b>	Please what type of engineering study is required, if any:	Study needed for documented tower
<b>Tower Reinforcements</b>	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

**Auxiliary  
Tower**

**Tower Rigging Costs**

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

**Auxiliary  
Tower**

**Other Tower Expenses Not Listed**

Information not provided.

## Primary Tower

### Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	
	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	1023883
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	45° 03' 45.0" N-
	Longitude (NAD83)	093° 08' 22.0" W-
	Overall Structure Height	1437.97 feet
	Support Structure Height	1288.04 feet
	Ground Elevation Above Mean Sea Level (AMSL)	1000.32 feet
	Structure Type	TOWER - Free Standing or Guyed Structure

	Tower Owner	Telefarm, Inc.
	Date Constructed	01/01/2001

**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
60641	KTMY	FM
9641	KMNB	FM
9629	WCCO-TV	DTV
35642	KSTP-FM	FM

## 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	Other
Helicopter Services Required	Are helicopter services required?	No

**Primary  
Tower**

**Other Tower Expenses Not Listed**  
Information not provided.

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	864
	Explanation	Outside project management services are likely necessary to coordinate work, delivery, testing, and other issues with other users of antenna farm - please see Exhibit 1.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A

	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	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	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	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

Other Professional Services Expenses Not Listed

Services Costs

Name	Description
Comprehensive coverage verification, Auxiliary Antenna	Conduct field study coverage verification for backup antenna
RF exposure measurements, Auxiliary Antenna	Conduct RF exposure measurements for backup antenna operations
Outside Legal Advice and Analysis	Attorney fees and FCC transition requirement

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
<b>Other Miscellaneous Expenses</b>	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**

Name	Description
<b>Transmitter Control</b>	Remote control needed to comply with FCC requirements for main studio control.
<b>Internal Staff Work</b>	Director of Engineering, RF supervisor and transmitter engineer are expected to devote more than 900 hours on this channel transition. See Exhibit 1.

## 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
<b>Primary Transmitter THU9evo-48</b>	<b>\$3,701,306.00</b>	<b>\$2,249,112.47</b>		<b>\$382,901.70</b>	
Other Electrical Service: See attached quote from Master Electrical Company, Inc.	<i>\$229,306.00</i>	\$229,306.00	Please see attached quote, which is consistent with current plan to construct by current deadline - See Master Electrical Company, Inc. (Primary) Transmitter Quote.	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 68.5 - 75 kW	\$1,999,000.00	\$1,636,904.77	N/A	\$382,901.70	N/A

UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$382,901.70	***System Notice: Estimate adjusted and locked because line has been superseded. ***See Exhibit 1, August 2017 Supplement, and additional supporting documentation. Amount includes appropriate state and local sales tax.	\$0.00	N/A
<b>Auxiliary Transmitter UAXTE- 12R44</b>	<b>\$476,500.00</b>	<b>\$389,895.57</b>		<b>\$0.00</b>	
UHF - Air Cooled Solid State Transmitter 10 - 12 kW	\$336,500.00	\$249,895.57	Potential costs include those noted on price quote, state sales tax, and other currently projected costs. See Exhibit 1.	N/A	N/A
UHF inside RF system	<b>\$140,000.00</b>	\$140,000.00	See Exhibit 1.	N/A	N/A
<b>Sub-total</b>	<b>\$4,177,806.00</b>	<b>\$2,639,008.04</b>	N/A	<b>\$382,901.70</b>	N/A
<b>Total for all systems</b>	<b>\$8,110,844.57</b>	<b>\$6,425,890.50</b>	N/A	<b>\$1,141,729.80</b>	N/A

## Components

Actual Information Description	File Name
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Other Electrical Service: See attached quote from Master Electrical Company, Inc.	Information not provided.	
UHF - Liquid Cooled Solid State Transmitter 68.5 - 75 kW	<b>Component Description:</b>  <b>Amount:</b>	Work performed on primary transmitter. \$382,901.70
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	<b>Component Description:</b>  <b>Amount:</b>	Work performed on primary transmitter. \$382,901.70
UHF - Air Cooled Solid State Transmitter 10 - 12 kW	Information not provided.	
UHF inside RF system	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
<b>Primary Antenna TUM-O5-16-80H-1-R-B</b>	<b>\$887,880.00</b>	<b>\$1,067,428.00</b>		<b>\$438,131.75</b>	
UHF - High Power Top Mount (200-1000 kW), Four Station broadband panel antenna, horizontally polarized	\$778,000.00	\$963,268.00	See Exhibit 1, as the bottom position in a top-mount, stacked antenna, which results in additional cost, and including sales tax.	\$438,131.75	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$80,000.00	See Exhibit 1, but consistent with cost per channel in cost catalog.	N/A	N/A
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	\$18,950.00	\$17,760.00	N/A	N/A	N/A

<b>Auxiliary Antenna TFU-24JSC- RT140</b>	<b>\$208,592.20</b>	<b>\$203,118.81</b>		<b>\$0.00</b>	
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$21,750.00	See Exhibit 1	N/A	N/A
Elbow complex, single channel, at antenna input, per 8 3/16. feedline (if needed)	\$15,250.00	\$11,766.61	See Exhibit 1, including sales tax.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A



UHF - High Power, Side Mount, basic slot antenna, 500 kW input, directional,, horizontally polarized	<b>\$158,202.20</b>	\$158,202.20	See Exhibit 1 (and quote with sales tax).	N/A	N/A
<b>Sub-total</b>	\$1,096,472.20	\$1,270,546.81	N/A	\$438,131.75	N/A
<b>Total for all systems</b>	\$8,110,844.57	\$6,425,890.50	N/A	\$1,141,729.80	N/A

## Components

Actual Information	
Description	File Name
UHF - High Power Top Mount (200-1000 kW), Four Station broadband panel antenna, horizontally polarized	<p><b>Component Description:</b> Work performed on the primary antenna and the mounting modifications for the primary antenna.</p> <p><b>Amount:</b> \$217,622.50</p> <p><b>Component Description:</b> Portion of invoice relevant to work performed on primary antenna.</p> <p><b>Amount:</b> \$220,509.25</p>
Sweep test of existing antenna	Information not provided.
New combiner, cost per channel (without antenna)	Information not provided.

Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	Information not provided.
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	Information not provided.
Side mount brackets for high power antennas (if not included in antenna base cost)	Information not provided.
Elbow complex, single channel, at antenna input, per 8 3/16. feedline (if needed)	Information not provided.
Sweep test of existing antenna	Information not provided.
UHF - High Power, Side Mount, basic slot antenna, 500 kW input, directional,, horizontally polarized	Information not provided.

Cost  
Information

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$588,525.00	\$441,062.76		\$220,509.25	
Rigid Transmission Line - copper, 8 3/16" broadband	\$588,525.00	\$441,062.76	N/A	\$220,509.25	N/A
Auxiliary Transmission Line	\$526,680.00	\$362,813.52		\$0.00	
Rigid Transmission Line - copper, 8 3/16" broadband	\$526,680.00	\$362,813.52	N/A	N/A	N/A
Sub-total	\$1,115,205.00	\$803,876.28	N/A	\$220,509.25	N/A
Total for all systems	\$8,110,844.57	\$6,425,890.50	N/A	\$1,141,729.80	N/A

Components

Actual Information	
Description	File Name
Rigid Transmission Line - copper, 8 3/16" broadband	<div><div>Component Description:</div><div>Amount:</div><div>Portion of invoice relevant to work performed on primary transmission line. \$220,509.25</div></div>

Rigid Transmission Line - copper, 8 3/16" broadband	Information not provided.
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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	\$591,600.00	\$562,000.00		\$9,000.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	\$9,000.00	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	\$0.00	N/A
Auxiliary Tower TOWER	\$381,100.00	\$362,000.00		\$9,000.00	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	\$9,000.00	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A

Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$972,700.00	\$924,000.00	N/A	\$18,000.00	N/A
<b>Total for all systems</b>	\$8,110,844.57	\$6,425,890.50	N/A	\$1,141,729.80	N/A

## Components

Actual Information	
Description	File Name
Structural engineering tower load study for well documented tower	<b>Component Description:</b> Malouf North Tower Study <b>Amount:</b> \$9,000.00
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	Information not provided.
Minor tower reinforcement /modifications	Information not provided.
Structural engineering tower load study for well documented tower	<b>Component Description:</b> Malouf South Tower Study <b>Amount:</b> \$9,000.00
Tall Tower (greater than 500')	Information not provided.
Minor tower reinforcement /modifications	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
<b>Outside Professional Services</b>	<b>\$387,706.00</b>	<b>\$431,209.00</b>		<b>\$76,813.99</b>	
Outside Legal Advice and Analysis	<i>\$8,859.00</i>	\$8,859.00	See Exhibit 2 (May 2018)	\$8,797.00	See attached vendor quote and exhibit 2 for further explanation.
RF exposure measurements, Auxiliary Antenna	<i>\$20,000.00</i>	\$20,000.00	See Exhibit 1.	N/A	N/A
Comprehensive coverage verification, Auxiliary Antenna	<i>\$80,000.00</i>	\$80,000.00	See Exhibit 1.	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	N/A	\$0.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$4,062.87	N/A
Project management of the transition	\$136,512.00	\$129,600.00	See Exhibit 1	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	\$7,000.00	N/A	\$2,625.00	N/A



Prepare and or review reimbursement form	\$2,630.00	\$60,000.00	This new estimate reflects a total of all quotes to date for this work during the repacking period. (Currently, one quote covered until Aug 2017 and was attached previously to this form.) The other quote is provided hereto. See also Exhibit 2 (May 2018)	\$58,579.12	New attachments include vendor quote as requested by the reviewer. See Exhibit 2 for further explanation.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,000.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A

RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/A	\$750.00	N/A
<b>Sub-total</b>	\$387,706.00	\$431,209.00	N/A	\$76,813.99	N/A
<b>Total for all systems</b>	\$8,110,844.57	\$6,425,890.50	N/A	\$1,141,729.80	N/A

## Components

Actual Information	
Description	File Name
Outside Legal Advice and Analysis	<p><b>Component Description:</b> Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p><b>Amount:</b> \$2,703.00</p>

**Component Description:**

Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.

**Amount:**

\$155.00

**Component Description:**

Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.

**Amount:**

\$715.50

**Component Description:**

Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.

**Amount:**

\$159.00

**Component Description:**

Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.

**Amount:**

\$238.50

**Component Description:**

Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.

**Amount:**

\$684.00

**Component Description:**

Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.

**Amount:**

\$504.00

<b>Component Description:</b>	Portion of invoice relevant attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$1,009.00

<b>Component Description:</b>	Portion of invoice relevant to attorney fees and FCC transition requirement.
<b>Amount:</b>	\$1,473.00

<b>Component Description:</b>	Portion of invoice relevant to attorney fees and FCC transition requirement. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$442.00

<b>Component Description:</b>	Portion of invoice relevant to attorney fees and FCC transition requirement.
<b>Amount:</b>	\$447.00

	<p><b>Component Description:</b></p> <p>Portion of invoice relevant to attorney fees and FCC transition requirement.</p> <p><b>Amount:</b></p> <p>\$267.00</p>
RF exposure measurements, Auxiliary Antenna	Information not provided.
Comprehensive coverage verification, Auxiliary Antenna	Information not provided.
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	<p><b>Component Description:</b></p> <p>Portion of invoice relevant to the license to cover for digital auxiliary construction permit.</p> <p><b>Amount:</b></p> <p>\$62.00</p>

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="702 100 1139 371"> <p><b>Component Description:</b></p> </td><td data-bbox="1139 100 1426 371"> <p>Portion of invoice relevant to preparation of construction permit application.</p> </td></tr> <tr> <td data-bbox="702 371 1139 483"> <p><b>Amount:</b></p> </td><td data-bbox="1139 371 1426 483"> <p>\$489.50</p> </td></tr> <tr> <td data-bbox="702 483 1139 1043"> <p><b>Component Description:</b></p> </td><td data-bbox="1139 483 1426 1043"> <p>Portion of invoice relevant to preparation of construction permit application. New attachment includes cover letter as requested by reviewer. See Exhibit 2 for further explanation.</p> </td></tr> <tr> <td data-bbox="702 1043 1139 1155"> <p><b>Amount:</b></p> </td><td data-bbox="1139 1043 1426 1155"> <p>\$3,573.37</p> </td></tr> </table>	<p><b>Component Description:</b></p>	<p>Portion of invoice relevant to preparation of construction permit application.</p>	<p><b>Amount:</b></p>	<p>\$489.50</p>	<p><b>Component Description:</b></p>	<p>Portion of invoice relevant to preparation of construction permit application. New attachment includes cover letter as requested by reviewer. See Exhibit 2 for further explanation.</p>	<p><b>Amount:</b></p>	<p>\$3,573.37</p>
<p><b>Component Description:</b></p>	<p>Portion of invoice relevant to preparation of construction permit application.</p>								
<p><b>Amount:</b></p>	<p>\$489.50</p>								
<p><b>Component Description:</b></p>	<p>Portion of invoice relevant to preparation of construction permit application. New attachment includes cover letter as requested by reviewer. See Exhibit 2 for further explanation.</p>								
<p><b>Amount:</b></p>	<p>\$3,573.37</p>								
<p>Project management of the transition</p>	<p>Information not provided.</p>								
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>								

Perform engineering study for new channel assignment and antenna development	<table> <tr> <td data-bbox="708 181 1015 208"><b>Component Description:</b></td><td data-bbox="1150 181 1374 327">Initial study of new antenna option for KSTC-TV; map; pop counts; memo.</td></tr> <tr> <td data-bbox="708 342 815 369"><b>Amount:</b></td><td data-bbox="1150 342 1246 369">\$375.00</td></tr> <tr> <td data-bbox="708 481 1015 508"><b>Component Description:</b></td><td data-bbox="1150 481 1374 627">Prepared new application based on new antenna specification.</td></tr> <tr> <td data-bbox="708 642 815 669"><b>Amount:</b></td><td data-bbox="1150 642 1267 669">\$1,500.00</td></tr> <tr> <td data-bbox="708 781 1015 808"><b>Component Description:</b></td><td data-bbox="1150 781 1374 927">Work performed on auxiliary antenna system design; earlier telcon.</td></tr> <tr> <td data-bbox="708 943 815 969"><b>Amount:</b></td><td data-bbox="1150 943 1246 969">\$500.00</td></tr> <tr> <td data-bbox="708 1081 1015 1108"><b>Component Description:</b></td><td data-bbox="1150 1081 1374 1182">Initial review and work on KSTC-TV repack planning.</td></tr> <tr> <td data-bbox="708 1198 815 1225"><b>Amount:</b></td><td data-bbox="1150 1198 1246 1225">\$250.00</td></tr> </table>	<b>Component Description:</b>	Initial study of new antenna option for KSTC-TV; map; pop counts; memo.	<b>Amount:</b>	\$375.00	<b>Component Description:</b>	Prepared new application based on new antenna specification.	<b>Amount:</b>	\$1,500.00	<b>Component Description:</b>	Work performed on auxiliary antenna system design; earlier telcon.	<b>Amount:</b>	\$500.00	<b>Component Description:</b>	Initial review and work on KSTC-TV repack planning.	<b>Amount:</b>	\$250.00
<b>Component Description:</b>	Initial study of new antenna option for KSTC-TV; map; pop counts; memo.																
<b>Amount:</b>	\$375.00																
<b>Component Description:</b>	Prepared new application based on new antenna specification.																
<b>Amount:</b>	\$1,500.00																
<b>Component Description:</b>	Work performed on auxiliary antenna system design; earlier telcon.																
<b>Amount:</b>	\$500.00																
<b>Component Description:</b>	Initial review and work on KSTC-TV repack planning.																
<b>Amount:</b>	\$250.00																
Prepare and or review reimbursement form	<table> <tr> <td data-bbox="708 1368 1015 1395"><b>Component Description:</b></td><td data-bbox="1150 1368 1362 1715">Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</td></tr> <tr> <td data-bbox="708 1731 815 1758"><b>Amount:</b></td><td data-bbox="1150 1731 1267 1758">\$5,245.00</td></tr> </table>	<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.	<b>Amount:</b>	\$5,245.00												
<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.																
<b>Amount:</b>	\$5,245.00																



<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$79.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. New attachment includes a vendor quote as requested by the reviewer. See Exhibit 2 for further explanation.
<b>Amount:</b>	\$5,439.62

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes cover letter and vendor quote. See Exhibit 2 for further explanation.
<b>Amount:</b>	\$2,067.00

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$3,595.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$1,818.00

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$3,343.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$5,522.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$6,627.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$2,246.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$171.00

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$1,948.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. New attachment includes a vendor quote as requested by the reviewer. See Exhibit 2 for further explanation.
<b>Amount:</b>	\$10,520.00

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$2,023.50

<b>Component Description:</b>	Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.
<b>Amount:</b>	\$283.00

	<table> <tr> <td data-bbox="708 98 1107 546"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1107 98 1426 546"> <p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$318.00</p> </td></tr> <tr> <td data-bbox="708 546 1107 994"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1107 546 1426 994"> <p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$7,012.50</p> </td></tr> <tr> <td data-bbox="708 994 1107 1603"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1107 994 1426 1603"> <p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$318.00</p> </td></tr> </table>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$318.00</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$7,012.50</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$318.00</p>
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$318.00</p>						
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$7,012.50</p>						
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Portion of invoice relevant to preparation of reimbursement form. Attachment includes a vendor quote. See exhibit 2 for further explanation.</p> <p>\$318.00</p>						
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="708 1603 1107 2009"> <p><b>Component Description:</b></p> <p><b>Amount:</b></p> </td><td data-bbox="1107 1603 1426 2009"> <p>Prepare Form 2100; exhibits; modification for increase in antenna height; new antenna.</p> <p>\$2,000.00</p> </td></tr> </table>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare Form 2100; exhibits; modification for increase in antenna height; new antenna.</p> <p>\$2,000.00</p>				
<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Prepare Form 2100; exhibits; modification for increase in antenna height; new antenna.</p> <p>\$2,000.00</p>						

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	Information not provided.
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	<div> <div> <b>Component Description:</b> </div> <div> Portion of invoice for work performed on preparation of exhibits and engineering section of auxiliary construction permit application. </div> </div> <div> <b>Amount:</b> </div> <div> \$750.00 </div>

**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
<b>Other Expenses</b>	<b>\$158,320.37</b>	<b>\$157,760.37</b>		<b>\$5,373.11</b>	
Internal Staff Work	<i>\$40,736.00</i>	\$40,736.00	See Exhibit 1 and August 2017 Supplement.	\$3,820.77	N/A
Transmitter Control	<i>\$4,580.00</i>	\$4,580.00	See Exhibit 1 (and attached quote)	N/A	N/A
MVPD Notification of Channel Change	<i>\$1,000.00</i>	\$1,000.00	See Exhibit 1.	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$4,100.00</i>	\$4,100.00	See Exhibit 1.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$20,500.00</i>	\$20,500.00	See Exhibit 1.	N/A	N/A

Equipment Delivery and Handling Charges	<b>\$72,162.00</b>	\$72,162.00	Delivery of two transmitters, two antennae, and two transmission lines has not been included in above cost estimates. See Exhibit 1 and August 2017 Supplement (and other supporting exhibits from GatesAir and Dielectric referenced therein).	\$382.50	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	\$0.00	N/A
Equipment Storage	<b>\$3,357.37</b>	\$3,357.37	N/A	\$1,169.84	N/A
<b>Sub-total</b>	\$158,320.37	\$157,760.37	N/A	\$5,373.11	N/A
<b>Total for all systems</b>	\$8,110,844.57	\$6,425,890.50	N/A	\$1,141,729.80	N/A

## Components

**Actual Information**  
**Description**

**File Name**



Internal Staff Work	<p><b>Component Description:</b> Including pay stubs from an entity that is commonly owned with the licensee of KSTC-TV, LLC.</p> <p><b>Amount:</b> \$2,109.39</p>
	<p><b>Component Description:</b> Cannot delete cost component section. Please disregard.</p> <p><b>Amount:</b> N/A</p>
	<p><b>Component Description:</b> Partial invoice regarding repack project.</p> <p><b>Amount:</b> \$27.40</p>
	<p><b>Component Description:</b> Including pay stubs from an entity that is commonly owned with the licensee of KSTC-TV, LLC.</p> <p><b>Amount:</b> \$1,683.98</p>
Transmitter Control	Information not provided.
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
DTV Medical Facility Notification	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.

Equipment Delivery and Handling Charges	<div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Equipment Handling  \$382.50 </div> </div> <div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Shipping cost for Dielectric, 8-75 to Type-N test transition tuned to channel 30 to determine antenna viability for use on channel 30 as part of the repack.  \$234.02 </div> </div>
FCC Filing Fees - Form 2100 license to cover application	<div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Application fee regarding license to cover for digital auxiliary construction permit application.  \$325.00 </div> </div>
Equipment Storage	<div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Equipment Storage  \$584.92 </div> </div> <div> <div> <b>Component Description:</b>  <b>Amount:</b> </div> <div> Equipment Storage  \$584.92 </div> </div>

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$8,110,844.57	\$6,425,890.50	\$1,141,729.80

<b>Reimbursement Status</b>	<b>Question</b>	<b>Response</b>
	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"> <li>1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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

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

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

**David A. Jones**  
*Vice President*

05/06/2019

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

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><b>David A. Jones</b>  <i>Vice President</i></p> <p>05/06/2019</p>

## Attachments