

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 5342 Service: LPD Call KSGA-LD Channel:

ID: Sign:

3 (Low VHF) File **0000089588**

Number:

FRN: 0008195455 Eligibility Eligible Date 04/07

Status: Submitted: /2021

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KJLA, LLC	Francis X. Wilkinson 2323 CORINTH AVENUE LOS ANGELES, CA 90064 United States	+1 (310) 943- 5288	fwilkinson@kjla. 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

The Preparer is same as the reimbursement contact.

Broadcaster Information and Transition Plan Question Response

Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	No
Briefly describe transition plan	KSGA displaced to VHF Channel 3

Transmitters

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

Primary Transmitter

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	CTX1000
	Year	2013
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1 kW

Primary Transmitter

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	TAVD- 3000H
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3 kW
	Justification for New Transmitter	Old transmitter UHF channel cannot be retuned to VHF Ch 3.

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	No

HVAC Service	Does the replacement transmitter require HVAC Service?	No
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No

Other Transmitter Cost Not Listed

Primary **Transmitter** Information not provided.

Antennas

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

Primary Antenna

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Ownership	Owned
	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?	Yes
Existing Antenna	Mounting	Side Mount
Manufacturer and Type	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	ATC-BC8D- 23
	Year	2013

Primary Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Change Type	Purchase New
	Ownership	Owned
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna	Mounting	Side Mount
Manufacturer and Types	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Other
	Other Antenna Type	Dipole Reflector
	ERP: (Effective Radiated Power)	0.7 kW
	Manufacturer	
	Model	CL-26
	Year	2020
	Justification for New Antenna	displacement to VHF requires new antenna

Primary Antenna

Other Antenna Costs

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No

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?	No

Primary Antenna

Other Antenna Cost Not Listed

Name	Description	
install antenna	Installation of antenna	

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

Primary Transmission Lite

Existing Transmission Line

n Line Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	No
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Туре	Flexible Air
	Diameter	1 5/8 inches
	Number of parallel runs	1
	Length	180 feet per run

Primary Transmission

New Transmission Line

n Line Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Туре	Flexible Air
	Diameter	1 5/8 inches
	Number of parallel runs	1
	Length	180 feet per run
	Justification for New Transmission Line	channel change from Uhf to CH3 Vhf
Interior RF Systems	Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators?	No

Primary Other Transmission Line Expenses Not Listed

Transmission Line tion not provided.

Tower Equipment And Rigging Costs

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	No

Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	40
	Explanation	KSGA engineering staff are to busy with other projects to be able to manage this installation
Outside RF consulting Engineering Services	Perform engineering study for displacement application	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Prepare Form 601	No
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	No

	Prepare and file Form FCC License to Cover Application	No
	Prepare request for Special Temporary Authority	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Form 399 assistance or other program management costs	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	Yes
	Number of Days	3
	Justification	work involved is outside the scope of stations engineering dept.

Outside
Professional Services Expenses Not Listed
Professional Services ©qstsided.

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Permit and Filing Costs	FCC Construction Permit Major Change	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
Point to Point Microwave (STL/ICR)	Frequency Coordination for Unidirection System	No
	Frequency Coordination for Bi-Direction System	No
	New Point to Point Microwave System	No

Other Expenses

Other Expenses Not Listed

Information not provided.

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 TAVD-3000H	\$70,784.00	\$70,784.00		\$70,784.00	
Low VHF - Air Cooled Solid State Transmitter 3 kW	\$70,784.00	\$70,784.00	3kW VHF Transmitter Cost	\$70,784.00	N/A
Sub-total	\$70,784.00	\$70,784.00	N/A	\$70,784.00	N/A
Total for all systems	\$172,169.00	\$170,564.00	N/A	\$74,544.00	N/A

Components

Actual Information Description	File Name	
Low VHF - Air Cooled Solid State Transmitter 3 kW	Component Description: Amount:	KSGA Transmitter \$70,784.00

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 CL- 26	\$25,125.00	\$25,125.00		\$0.00	
install antenna	\$7,800.00	\$7,800.00	Cost Catalog less than 500 ft	N/A	N/A
Low VHF- Low Power, Side Mount, Other, 0.7kW input, Horizontal	\$17,325.00	\$17,325.00	Change from UHF to VHF requires new antenna	N/A	N/A
	\$0.00	\$0.00	N/A	N/A	N/A
Sub-total	\$25,125.00	\$25,125.00	N/A	\$0.00	N/A
Total for all systems	\$172,169.00	\$170,564.00	N/A	\$74,544.00	N/A

Components

Information not provided.

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	\$5,940.00	\$5,940.00		\$0.00	
Flexible Air Transmission Line - dielectric, 1 5 /8"	\$5,940.00	\$5,940.00	N/A	N/A	N/A
Sub-total	\$5,940.00	\$5,940.00	N/A	\$0.00	N/A
Total for all systems	\$172,169.00	\$170,564.00	N/A	\$74,544.00	N/A

Components

Information not provided.

Tower Equipment and Rigging Costs

Cost Information

Information Information not provided.

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$68,985.00	\$67,380.00		\$3,760.00	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$1,050.00	N/A	\$1,050.00	N/A
Perform engineering study for displacement application	\$1,800.00	\$1,800.00	N/A	N/A	N/A
Additional Field Engineering Service, 3 Days	\$4,500.00	\$4,500.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$52,600.00	\$52,600.00	N/A	N/A	N/A

Components

Actual Information Description	File Name	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	7 hours Engineering Displacement KSGA \$1,050.00
Perform engineering study for displacement application		
Additional Field Engineering Service, 3 Days	Information not provided.	

Comprehensive coverage verification via field study, if needed	Information not provided.	
Project management of the transition	Information not provided.	
Prepare/ Review 399 reimbursement form	Component Description: Amount:	Fee for 399 Reimbursement Turnkey Project Management \$1,710.00
Form 399 assistance or other Program Management costs	Component Description:	Fee for 399 Eligibility and 187 preparation and filing
	Amount:	\$1,000.00

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	\$1,335.00	\$1,335.00		\$0.00	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$1,000.00	\$1,000.00	N/A	N/A	N/A
Sub-total	\$1,335.00	\$1,335.00	N/A	\$0.00	N/A
Total for all systems	\$172,169.00	\$170,564.00	N/A	\$74,544.00	N/A

Components

Information not provided.

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$172,169.00	\$170,564.00	\$74,544.00

Reimbursem	enrestiatus	Response
	The facility has ceased operating on its pre- auction channel.	Yes
	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. Susan Hansen Consultant

04/07/2021

Section Question Response

Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).

- 1. The Authorized
 Person signing
 below certifies and
 represents that he
 /she is authorized to
 submit this TV
 Broadcaster
 Relocation Fund
 Reimbursement
 Form on behalf of
 the above-named
 entity.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

- 4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
- 5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Francis
Wilkinson
Vice
President

04/07/2021

Attachments