# FEDERAL COMMUNICATIONS COMMISSION

Approved by

# Information and Instructions

3060 -0800

Est. Avg. Burden Per Response: 1.75 Hrs

# FCC Application for Assignment of Authorization or Transfer of Control: Wireless Telecommunications Bureau Public Safety and Homeland Security Bureau

# NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT OF 1995

We have estimated that each response to this collection of information will take on average 1.75 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Washington, DC 20554, Paperwork Reduction Project (3060-0800). We will also accept your comments via the Internet if you send them to PRA@fcc.gov. *Please do not send completed application forms to this address.* 

You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection unless it displays a currently valid OMB control number with this notice. This collection has been assigned OMB control number 3060-0800.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of a statute, FCC regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding.

All parties and entities doing business with the Commission must obtain a unique identifying number called the FCC Registration Number (FRN) and supply it when doing business with the Commission. Failure to provide the FRN may delay the processing of the application. This requirement is to facilitate compliance with the Debt Collection Improvement Act of 1996 (DCIA). The FRN can be obtained electronically from the FCC's website at <a href="http://www.fcc.gov">http://www.fcc.gov</a> or by manually submitting FCC 160. FCC 160 is available from the FCC's web site at <a href="http://www.fcc.gov/formpage.html">http://www.fcc.gov/formpage.html</a>, by calling the FCC's Forms Distribution Center at (800) 418-FORM (3676), or from the FCC's Fax Information System by dialing (202) 418-0177.

This notice is required by the Privacy Act of 1974, Public Law 93-579, December 31, 1974, 5 U.S.C. Section 552a(e)(3), and the Paperwork Reduction Act of 1995, Public Law 104-13, October 1, 1995, 44 U.S.C. 3507.



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#### Purpose of Form

FCC Form 603 is a multi-purpose form. It is used to request approval for an Assignment of Authorization (Assignment) or Transfer of Control (Transfer) involving licenses in the Wireless and/or Public Safety Radio Services. This form is also used to provide notification of a consummated Assignment or Transfer that has previously been consented to by the FCC or for which notification but not prior consent is required. The data collected on the form is used by the FCC to determine whether the public interest would be served by approval of the requested Assignment or Transfer.

Each application, amendment, or other request must contain only one Main Form but may contain as few or as many of the optional schedules as necessary.

#### Main Form

The purpose of the Main Form is to obtain information sufficient to identify the parties to the proposed Assignment or Transfer, establish the parties' eligibility and qualifications for entering into the Assignment or Transfer and classify the filing. The Main Form also contains the required certifications and signature blocks for both the Assignor/Transferor and the Assignee/Transferee. The Main Form is required with every filing.

(Note: The FCC Registration Number must be completed on the Main Form for all application purposes.)

#### **Schedules**

In addition to the Main Form, which is required with every filing, completion of certain schedule(s) may also be required. The purposes of the optional schedules are as follows:

**Schedule A** (Schedule for Licensees that Received Bidding Credits or Participate in the Installment Payment Plan, or Involving Licenses Won in Closed Bidding) This schedule establishes whether unjust enrichment provisions or other restrictions apply.

**Schedule B** (Schedule for Defined Geographic Areas To Be Partitioned or for Spectrum To Be Disaggregated) This schedule is used for Assignment applications in geographically-licensed services that involve partitioning of the licensed area or disaggregation of the licensed spectrum. This schedule must be used when the partitioned area involves FCC-defined geographic boundaries (*i.e.*, FCC licensing boundaries (Major Trading Areas (MTAs), Basic Trading Areas (BTAs), etc.) or county boundaries.

**Schedule C** (Schedule for Undefined Geographic Areas To Be Partitioned) This schedule is used for Assignment applications in geographically-licensed services that involve partitioning of the licensed area when the partitioned area cannot be described using FCC-defined geographic boundaries or county boundaries. This schedule must be used to provide the geographic coordinates (latitude and longitude) that depict the periphery of the partitioned area.

**Schedule D** (Schedule for Notification of Consummation of an Assignment of Authorization or a Transfer of Control) This schedule is used to notify the FCC that a previously consented to Assignment or Transfer has been consummated.

**Schedule E** (Schedule for Request for Extension of Time To Consummate an Assignment of Authorization or a Transfer of Control) This schedule is used to request additional time to consummate a previously consented to Assignment or Transfer that the parties will not consummate in the time previously allotted to them by the FCC.

#### Types of Filings

#### Assignment of Authorization

An Assignment of Authorization involves a change in the identity of the holder of the License and generally entails the changing of the Licensee's name.

For an Assignment, the Assignor must request approval using FCC Form 603 and generally must receive prior consent (unless the Assignment is Involuntary or a post-consummation notification of a *pro forma* Assignment) from the FCC before assigning its authorization(s). For additional information regarding Assignments that can be filed without receiving prior consent from the FCC, see the sections titled Involuntary Transactions and Post-Consummation Notifications of *Pro Forma* Transactions.

Both the Assignor and Assignee must sign the form. In addition, if required pursuant to Section 1.919 of the Commission's Rules, the Assignee must file FCC Form 602, FCC Ownership Disclosure Information for the Wireless Telecommunications Services, unless a current and up-to-date FCC Form 602 is already on file at the FCC. For information regarding the filing of FCC Form 602, *see* Sections 1.919, 1.2112 of the Commission's Rules.

#### Full Assignment of Authorization

When the authorization for all of the facilities of a station or market is assigned, this is called a "Full" Assignment of Authorization. To apply for a full Assignment, the Assignor must complete the Authorizations To Be Assigned or Transferred section on the Main Form by providing the Call Sign and Radio Service Code for each of the authorizations that are being assigned.

#### Partial Assignment of Authorization

When the authorization for some, but not all, of the facilities of a station or market is assigned, this is called a "Partial" Assignment of Authorization.

To apply for a partial Assignment of a geographically-licensed authorization, the Assignor must complete the Authorizations To Be Assigned or Transferred section on the Main Form by providing the Call Sign and Radio Service Code for each of the authorizations that are being assigned as well as complete Schedule B and, if applicable, Schedule C.

To apply for a partial Assignment of a site-specific authorization, the Assignor must complete the Authorizations To Be Assigned or Transferred section on the Main Form by providing the Call Sign and Radio Service Code for each of the authorizations that are being assigned as well as complete other portions of the Authorizations To Be Assigned or Transferred section to fully describe the partial Assignment.

#### Transfer of Control

A Transfer of Control involves (1) a change from less than 50 percent ownership to 50 percent or more ownership of a Licensee or (2) the transfer of controlling interest in the ownership of a Licensee to another party or parties. See Section 1.948(b) of the Commission's Rules. A Transfer of Control involves a transfer of controlling interest in ownership but generally does not involve the changing of the Licensee's name. Refer to the applicable FCC rules and decisions for definitions of controlling interest and ownership.

For a Transfer, the Transferor must request approval using FCC Form 603 and generally must receive prior consent (unless the Transfer is Involuntary or a post-consummation notification of a *pro forma* Transfer) from the FCC before transferring control of the Licensee's authorization(s). For additional information regarding Transfers that can be filed without receiving prior consent from the FCC, see the sections titled Involuntary Transactions and Post-Consummation Notifications of *Pro Forma* Transactions.

Both the Transferor and Transferee must sign the form. In addition, if required pursuant to Section 1.919 of the Commission's Rules, the Transferee must file FCC Form 602, FCC Ownership Disclosure Information for the Wireless Telecommunications Services, unless a current and up-to-date FCC Form 602 is already on file at the FCC.

#### **Involuntary Transactions**

An Involuntary Assignment or Transfer involves the death or legal disability of a Licensee, a member of a partnership, or a person directly or indirectly in control of a corporation that is a Licensee. An application for an Involuntary Assignment or Transfer (Item 7 must be 'Y', Item 8a must be 'Involuntary' and a date must be provided in Item 8b) must be filed within 30 days after the occurrence of such death or legal disability. For additional information, *see* Section 1.948(g) of the Commission's Rules. **Note**: Involuntary applications should also be filed when a Licensee declares bankruptcy.

#### Post-Consummation Notifications of Pro Forma Transactions

In the case of a non-substantial (*pro forma*) Assignment or Transfer involving a telecommunications carrier, as defined in Section 153(44) of the Communications Act, prior consent by the FCC is not required provided that the affected license(s) are not subject to unjust enrichment provisions, the Assignment or Transfer does not involve a proxy contest, and the Assignr/Transferor provides notice of the transaction (Item 7 must be 'Y', Item 8a must be 'Voluntary', Item 9a must be 'Y', Item 9b must be 'Y' and a date must be provided in Item 9c) within 30 days of completion of the Assignment or Transfer. For additional information, see Section 1.948(c) (1) of the Commission's Rules.

#### Notification of Consummation

For an Assignment, the Assignee must sign and submit the FCC Form 603 Main Form and Schedule D within the prescribed time frame outlined below under the section titled 180-Day Period. For a Transfer, the Transferee must sign and submit the FCC Form 603 Main Form and Schedule D within the prescribed time frame outlined below under the section titled 180-Day Period. **Note**: Notifications of consummation do not have to be filed for post-consummation notifications of a *pro forma* Assignment or Transfer, or Involuntary Assignment or Transfer.

**Note:** If parties do not wish to consummate the transaction, the Assignor (for an Assignment) or the Transferor (for a Transfer) may submit an application to withdraw a previously consented to application.

#### **Extension of Time to Consummate**

For an Assignment, the Assignor must sign and submit the FCC Form 603 Main Form and Schedule E within the prescribed time frame outlined below under the section titled One Hundred and Eighty-Day Period. For a Transfer, the Transferor must sign and submit the FCC Form 603 Main Form and Schedule E within the prescribed time frame outlined below under the section titled One Hundred and Eighty-Day Period.

#### 180-Day Period

Assignments and Transfers must be consummated and notification provided to the Commission within 180 days of the date of public notice of the FCC consent, and a Notification of Consummation (Main Form and Schedule D) must be filed no later than 30 days after the actual consummation date, unless an Extension of Time To Consummate (Main Form and Schedule E) is filed prior to the expiration of this 180-day period.-

Note: If an Assignment or Transfer is not consummated within 180 days of public notice of approval and a timely filed Notification of Consummation is not submitted or a timely filed request for an Extension of Time to Consummate is not submitted, FCC consent to that transaction is no longer valid.

#### Information Current and Complete

Information filed with the FCC must be kept current and complete. Parties to the application must notify the FCC regarding any substantial and significant changes in the information furnished in the application. See Section 1.65 of the Commission's Rules.

#### **Applicable Rules and Regulations**

Applicants should obtain the relevant parts of the Commission's Rules, which are located in Part 47 of the Code of Federal Regulations (CFR). Copies of Part 47 CFR may be purchased by contacting the Superintendent of Documents, Government Printing Office, Washington, DC 20402, by calling (202) 512-1800 or by accessing the Government Printing Office's website at http://www.access.gpo.gov.

#### **Application Fees and Filing Locations**

An application fee may be required with this form. To determine the required fee amount, refer to Subpart G of Part 1 of the Commission's Rules (47 CFR Part 1, Subpart G) and the current Fee Filing Guide. For assistance with fees applicable to the radio services governed by the Commission's Rules, call (877) 480-3201 (TTY (717) 338-2824). The current Fee Filing Guide can be downloaded from the FCC's website at http://www.fcc.gov/fees, by calling the FCC's Forms Distribution Center at (800) 418-FORM (3676), or from the FCC's Fax Information System by dialing (202) 418-0177.

Paper applications requiring a fee must be mailed to the Federal Communications Commission, P.O. Box 979097, St. Louis, MO 63197-9000 or hand delivered to the U.S. Bank, Attn: FCC Government Lockbox #979097, SL-MO-C2-GL, 1005 Convention Plaza, St. Louis, MO 63101.

**Non-feeable paper applications** should be mailed to Federal Communications Commission, 1270 Fairfield Road, Gettysburg, PA 17325-7245. Hand-deliveries and messenger-deliveries should be delivered to Federal Communications Commission, 1280 Fairfield Road, Gettysburg, PA 17325-7245.

#### Submission of Paper-Filed Forms

One original paper copy of this application is required to be filed with the Commission. The Main Form and the applicable schedules should be submitted as one package, stapled in the upper left corner. The Main Form should be first, with the schedules attached in alphabetical order.

#### Exhibits

Each document required to be filed as an exhibit should be current as of the date of filing. Each page of every exhibit must be identified with the number or letter of the exhibit, the number of the page of the exhibit, and the total number of pages of the exhibit.

If material is to be incorporated by reference, see the instruction on incorporation by reference.

Note: Some Commission Rules require Applicants to attach one or more exhibits to an application in addition to the information requested in the application form.

#### Incorporation by Reference

You may incorporate by reference documents, exhibits, or other lengthy showings already on file with the FCC only if the information previously filed is more than one 8 1/2" by 11" page in length, all information therein is current and accurate in all significant respects, and the reference states specifically where the previously filed information can be found (*i.e.*, station call sign and application file number, title of proceeding, docket number and legal citations), including exhibit and page references. Items that call for numbers or that can be answered 'Y' or 'N' or with other short answers must be answered directly without reference to a previous filing.

#### Assistance with Completing this Form

For assistance with this form, contact the Federal Communications Commission, 1270 Fairfield Road, Gettysburg, PA 17325-7245, or call (877) 480-3201 (TTY (717) 338-2824).

#### **Technical Assistance for Electronic Filers**

For technical assistance with filing electronically, contact the FCC at (877) 480-3201.

# Instructions for FCC Form 603 Main Form

#### **General Information**

<u>Item 1</u> Indicate the purpose for which the application is being filed by inserting the appropriate two-letter abbreviation from the following list

(only one purpose may be specified).

- AA Assignment of Authorization
- TC Transfer of Control

**AM** - Amendment: To amend a previously filed, currently pending application. Use Item 2 to provide the File Number of the previously filed application. All appropriate schedules must be completed and attached, and must accurately reflect the effect and purpose of the amendment.

**WD** - Withdrawal: To withdraw a previously filed, currently pending or consented to application. Use Item 2 to provide the File Number of the pending or consented to application.

**NT** - Required Notification: To notify the FCC that, within the required time period, an Assignment or Transfer has been consummated.

**EX** - Request for Extension of Time: To request additional time to consummate an Assignment or Transfer.

<u>Item 2</u> If the filing is an amendment or withdrawal of a previously filed application, provide the File Number of the original application. This information can be obtained by using ULS Application Search or by contacting the FCC at (877) 480-3201 (TTY 717-338-2824).

Item 3a Enter 'Y' if this application is one in a series of related applications involving other wireless licenses. Otherwise, enter 'N'.

The purpose of this item is to indicate whether the proposed transaction involves other wireless licenses not listed on this filing that are held by the Licensee, affiliates of the Licensee, or third parties (e.g., spectrum swaps or multi-party transactions). For this purpose, "affiliates" is defined in Section 1.2110(a)(4) of the Commission's Rules, and includes parents, subsidiaries, or commonly-controlled entities. Where a transaction involves the Assignment or Transfer of multiple licenses held by a single Licensee, a single form should be filed whenever possible. Where a transaction involves the Assignment or Transfer of licenses by affiliated Licensees or third-party Licensees, a separate form must be filed for each Licensee. Parties who seek to assign or transfer licenses as part of a larger transaction or plan on filing multiple applications are strongly encouraged to contact the bureau in advance of filing this form.

Item 3b If the response to 3a is 'Y' and this filing is the lead application, enter 'Y'. Otherwise, enter 'N'.

<u>Item 3c</u> If the response to 3b is 'N', provide the File Number of the lead application for this transaction. The lead application should contain an exhibit fully describing the proposed transaction. Any additional applications included as part of the proposed transaction may cross-reference this exhibit.

Item 3d Enter 'Y' if the transaction that is the subject of this filing also involves the Assignment or Transfer of non-wireless licenses or authorizations for which Commission approval or notification is required (*e.g.*, Section 214 authorizations, wireline or media authorizations).

Item 4 Enter 'Y' if attachments (other than associated schedules) are being filed with this application. Otherwise, enter 'N'.

**Note:** Section 310(d) of the Communications Act requires the Commission to determine that the public interest, convenience, and necessity would be served by the proposed Assignment or Transfer. To enable the Commission to make this determination, Applicants may in some instances be required to provide, by means of an attachment, additional information not specifically requested elsewhere on FCC Form 603 to establish the qualifications of the Assignee or Transferee or to otherwise demonstrate that the proposed transaction is in the public interest. The burden is on the Applicants to determine whether such additional information is necessary under Section 310(d) in light of the circumstances of the particular transaction. For example, if: 1) the application involves a non-*pro forma* Assignment or Transfer of a license in a subscriber-based service, and 2) the proposed Assignee or Transferee, its parent or any affiliate, directly or indirectly owns, controls, or holds an attributable interest in any other entity authorized to provide FCC-regulated subscriber-based services in a geographic area that overlaps the service area of a license that is the subject of the proposed Assignment or Transfer, the Applicants should generally file an attachment with their FCC Form 603 setting forth the factual circumstances and describing how the proposed transaction meets the public interest standard of Section 310(d). Applicants seeking further guidance on this issue are encouraged to contact the bureau in advance of filing FCC Form 603.

#### **Fees and Waivers**

Item 5a This item notifies the FCC that the Applicant is exempt from FCC application fees. If the response is 'Y', an exhibit demonstrating the Applicant's eligibility for exemption from FCC application fees must be submitted with this filing. For additional information regarding an Applicant's eligibility to be exempt from FCC application fees, see the current Fee Filing Guide or call (877) 480-3201 (TTY 717-338-2824).

<u>Item 5b</u> If a request for waiver/deferral of the FCC application fees is being filed with the FCC in conjunction with this filing and the application fees are not being submitted, enter 'Y'. Otherwise, enter 'N'. If 'Y', attach an exhibit with the date-stamped copy of the waiver/deferral request filed with the Commission's Office of the Managing Director/Office of General Counsel. Otherwise, enter 'N'.

<u>Item 6a</u> If the filing includes a request for waiver of the Commission's Rules (other than FCC application fees), enter 'Y' and attach an exhibit specifying the rule section(s) for which a waiver is being requested and demonstrating a justification for the requested waiver. *See* Section 1.925 of the Commission's Rules. Otherwise, enter 'N'.

Item 6b If the response to 6a is 'Y', provide the number of rule sections involved (do not enter the actual rule section(s)).

#### **Additional Transaction Information**

Item 7a Enter 'Y' if the Assignment or Transfer has already occurred. Otherwise, enter 'N'.

If the response to Item 7a is 'Y', the response to Item 8a is Voluntary, and the response to Item 9a or Item 9b is 'N', attach an exhibit explaining the circumstances.

Item 7b If the response to Item 7a is 'Y', provide the date the event occurred.

<u>Item 8</u> Indicate whether the Assignment or Transfer is Voluntary or Involuntary by checking the appropriate selection. For additional information regarding involuntary transactions, *see* Section 1.948(g) of the Commission's Rules.

Item 9a Enter 'Y' in this item if the application is a *pro forma* Assignment or Transfer. Otherwise, enter 'N'. If the response to this item is 'Y', a response to item 9b is required.

A *pro forma* assignment of authorization is one for which the actual controlling party does not change. For example, if an authorization is assigned by one wholly-owned subsidiary of a parent corporation to another wholly-owned subsidiary of the same corporation, this would be a *pro forma* Assignment of Authorization.

A *pro forma* transfer of control is one for which the actual controlling party does not change. For example, a corporate restructuring that changes the chain of ownership to the controlling corporation may give rise to a *pro forma* Transfer of Control of a Licensee.

<u>Item 9b</u> Enter 'Y' if this is a post-consummation notification of a *pro forma* Assignment or Transfer that is subject to the FCC's forbearance procedures pursuant to Section 1.948(c)(1) of the Commission's Rules. Otherwise enter 'N'.

<u>Item 10a</u> For Assignments of Authorization only (purpose AA in Item 1): Enter 'Y' if this application is being filed to partition or disaggregate a geographic-area license(s). Otherwise, enter 'N'. If the response to this item is 'Y', Schedule B and, if applicable, Schedule C must be completed. For additional information, see Section 1.948(f) of the Commission's Rules.

Item 10b For Assignments of Authorization only (purpose AA in Item 1): Enter 'Y' if this application is being filed to partially assign a

site-based license(s). Otherwise, enter 'N'. For additional information, see Section 1.948(e) of the Commission's Rules.

Item 11 This item indicates how the Assignment or Transfer is to be accomplished. If the facilities and other assets are to be sold, answer this item 'S'. If stock or other ownership interests in the Licensee or entity controlling the Licensee are to be assigned or transferred to another entity, answer this item 'T'. If the Assignment or Transfer is to be accomplished pursuant to court order (*e.g.*, to an estate, debtor-in-possession, or trustee), answer this item 'C'. If the Assignment or Transfer is to be accomplished by a court-supervised reorganization or liquidation, answer this item 'R'. If the response is 'O' explain in an exhibit how the Assignment or Transfer is to be accomplished.

#### **Designated Entity Information**

<u>Item 12a</u> Enter 'Y' if the Assignment or Transfer involves any licenses that were originally granted before April 25, 2006 and that were awarded with bidding credits within the last five years and/or any licenses that were originally granted after April 25, 2006, and that were awarded with bidding credits within the last ten years. Otherwise, enter 'N'.

The initial grant date is the date that the license was originally granted by the Commission after an auction, even if the license was acquired in the secondary market. The initial grant date is **not** the date on which the Commission granted an assignment or transfer of control of the license.

If the response to this item is 'Y' the license may be subject to the FCC's unjust enrichment rules. See Sections 1.2111(d), (e) of the Commission's Rules. If the response to this item is 'Y', Schedule A must be completed.

<u>Item 12b</u> Enter 'Y' if the Assignment or Transfer involves a license that was originally awarded subject to the FCC's installment payment program. Otherwise, enter 'N'.

If the response to this item is 'Y', the license may be subject to the FCC's unjust enrichment rules. See Sections 1.2111(c), (e) of the Commission's Rules. If the response to this item is 'Y', Schedule A must be completed.

Item 12c Enter 'Y' if the Assignment or Transfer involves a license that was originally awarded pursuant to closed bidding within the last five years. Otherwise, enter 'N'.

If the response to this item is 'Y', the license may be subject to assignment or transfer restrictions. *See* Sections 24.709 and 24.839 of the Commission's Rules. If the response to this item is 'Y', Schedule A must be completed.

#### **Competition Related Information**

Item 13 Enter 'Y' if this application for Assignment or Transfer involves a license that may be used for interconnected mobile voice and/or data services that would create a geographic overlap with another license, that also could be used to provide interconnected mobile voice and/or data services, in which the Assignee/Transferee already holds direct or indirect interests (of 10 percent or more), either as a Licensee or spectrum lessee/sublessee. Otherwise, enter 'N'.

Item 14a Enter 'Y' if the Assignment or Transfer application involves Cellular Radiotelephone, Broadband PCS, or Specialized Mobile Radio (SMR) license(s) and if the Assignee/Transferee holds a 10 percent or greater direct or indirect interest in any entity that has access (through license authorizations, leases, or subleases) to 10 MHz or more of such spectrum in a geographic area or market. Otherwise, enter 'N'.

If 'Y', specify in an exhibit all geographic areas/markets (*e.g.*, BTA, CMA, county, etc.) where there are spectrum overlaps and the total amount of spectrum that the Assignee/Transferee will hold and/or lease in each geographic area/market.

Item 14b Enter 'Y' if the Assignment or Transfer will result in the loss of one or more service provider(s)/competitor(s) in any of the overlap geographic areas/markets. Otherwise, enter 'N'.

#### Broadband Radio Service and Educational Broadband Service Information

These items enable the FCC to determine whether the Assignee/Transferee complies with Section 27.1202 of the Commission's Rules.

Item 15a If the proposed facilities will be used to provide multichannel video programming, enter 'Y'. Otherwise, enter 'N'.

<u>Item 15b</u> If response to 15a is 'Y', and the Applicants will operate, control or have an attributable interest in a cable television system whose franchise area is located within the geographic service area of the proposed facilities, enter 'Y'. Otherwise, enter 'N'.

If 'Y', provide an exhibit explaining how the Assignee/Transferee complies with Section 27.1202 of the Commission's Rules or justifying a waiver of that rule. If a waiver of the Commission's Rule(s) is being requested, 6a must be answered 'Y'.

This item enables the FCC to determine whether the Assignee/Transferee complies with Section 27.1202 of the Commission's Rules.

<u>Item 16</u> Enter 'Y' if the Assignee/Transferee complies with the programming requirements contained in Section 27.1203 of the Commission's Rules. Otherwise, enter 'N'.

If 'N', provide an exhibit explaining how the Assignee/Transferee complies with Section 27.1203 of the Commission's Rules or justifying a waiver of that rule. If a waiver of the Commission's Rule(s) is being requested, 6a must be answered 'Y'.

#### Licensee/Assignor Information

Items 17 through 29 identify the person or entity that is applying to assign the authorizations (Assignment of Authorization) or the Licensee in a Transfer of Control.

<u>Item 17</u> This item indicates the legal entity type of the Assignor (Assignment) or Licensee (Transfer). Select Individual, Unincorporated Association, Trust, Government Entity, Corporation, Limited Liability Company, General Partnership, Limited Partnership, Limited Liability Partnership, Consortium, or Other. When selecting 'Other', provide a description of the legal entity.

Item 18 Enter the ten-digit FRN assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission. The FRN can be obtained electronically through the FCC webpage at <a href="http://wireless.fcc.gov/uls">http://wireless.fcc.gov/uls</a> or by manually submitting FCC 160. FCC 160 is available for downloading from , by calling the FCC's Forms Distribution Center at (800) 418-3676, or the FCC's Fax Information System by dialing (202) 418-0177. Failure to provide the FRN will prevent the Commission from processing the application.

Items 19-27 Complete either Item 19 or Item 20, depending on whether the Assignor/Licensee is an individual or company, respectively. If completing Item 20, enter the individual to contact in Item 21. You may enter a post office box number in Item 22 or a street address in Item 23, or enter information for both items. Enter the city, state, and zip code in Items 24, 25, and 26. Refer to FCC Form 603 Main Form Instructions, Appendix I, for a list of valid state, jurisdiction, and area abbreviations. Enter a telephone number, including area code, in Item 27.

Note: The full legal name is required for Items 19 and 20.

Items 28 and 29 Enter the Assignor/Licensee fax number and e-mail address, if desired and available.

Failure to respond to FCC correspondence sent to the address of record may result in dismissal of an application, liability for forfeiture, or revocation of an authorization.

#### Demographics of Assignor/Licensee (Optional)

<u>Item 30</u> The information is optional and is requested for informational purposes only. Responses to this item will in no way affect processing of applications.

#### Assignor/Licensee Contact Representative

<u>Items 31-41</u> These items identify the contact representative for the Assignor/Licensee, if different from the Assignor/Licensee. This is usually the headquarters office of a large company, the law firm or other representative of the Assignor/Licensee, or the person or company that prepared or submitted the application on behalf of the Assignor/Licensee. If there is a question about the application, an FCC representative will communicate with the contact representative.

If the contact representative is the same as the Assignor/Licensee, check the box and do not complete the remaining items in this section. If the contact representative is not the same as the Assignor/Licensee, then provide the information and complete this section as follows:

- Either the Individual Name or the Company Name is required.
- If Individual Name is completed, then Company Name and Attention to are not required.
- If Company Name is completed, then either an Individual Name or the Attention to is required.
- Either a PO Box or a Street Address is required. Both may be provided.
- City, State and Zip Code are required.
- Telephone Number is required (including area code).
- FAX Number and E-Mail Address are optional.

#### Transferor Information (for transfers of control only)

Items 42 through 54 identify the person or entity that is applying for consent to transfer control of the Licensee.

<u>Item 42</u> This item indicates the legal entity type of the Transferor. Select Individual, Unincorporated Association, Trust, Government Entity, Corporation, Limited Liability Company, General Partnership, Limited Partnership, Limited Liability Partnership, Consortium, or Other. When selecting 'Other', provide a description of the legal entity.

Item 43 Enter the Transferor's ten-digit FRN assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission. The FRN can be obtained electronically through the FCC website at <a href="http://www.fcc.gov">http://www.fcc.gov</a> or by manually submitting FCC 160. FCC 160 is available for downloading from <a href="http://www.fcc.gov">http://www.fcc.gov</a> or by manually submitting FCC 160. FCC 160 is available for downloading from <a href="http://www.fcc.gov">http://www.fcc.gov</a> for provide the FRN will by calling (800) 418-FORM (3676), or from FCC's Fax Information System by dialing (202) 418-0177. Failure to provide the FRN will prevent the Commission from processing the application.

<u>Items 44-52</u> Complete either Item 44 or Item 45, depending on whether the Transferor is an individual or company, respectively. If completing Item 45, enter the individual to contact in Item 46. You may enter a post office box number in Item 47 or a street address in Item 48, or enter information for both items. Enter the city, state, and zip code in Items 49, 50, and 51. Refer to FCC Form 603 Main Form Instructions, Appendix I, for a list of valid state, jurisdiction, and area abbreviations. Enter a telephone number, including area code, in Item 52.

Note: The full legal name is required for Items 44 and 45.

Items 53 and 54 Enter the Transferor fax number and e-mail address, if desired and available.

Failure to respond to FCC correspondence sent to the address of record may result in dismissal of an application, liability for forfeiture, or revocation of an authorization.

#### **Demographics of Transferor (Optional)**

<u>Item 55</u> The information is optional and is requested for informational purposes only. Responses to this item will in no way affect processing of applications.

#### Transferor Contact Representative

<u>Items 56-66</u> These items identify the contact representative for the Transferor, if different from the Transferor. This is usually the headquarters office of a large company, the law firm or other representative of the Transferor, or the person or company that prepared or submitted the application on behalf of the Transferor. If there is a question about the application, an FCC representative will communicate with the contact representative.

If the contact representative is the same as the Transferor, check the box and do not complete the remaining items in this section. If the contact representative is not the same as the Transferor, then provide the information and complete this section as follows:

- Either the Individual Name or the Company Name is required.
- If Individual Name is completed, then Company Name and Attention To are not required.
- If Company Name is completed, then either an Individual Name or the Attention To is required.
- Either a PO Box or a Street Address is required. Both may be provided.
- City, State and Zip Code are required.
- Telephone Number is required (including area code).
- FAX Number and E-Mail Address are optional.

#### Assignee/Transferee Information

Items 67 through 81 identify the person or entity that is applying to become or control the Licensee of the authorizations listed in this application. For an Assignment of Authorization, the information provided in these items will become the Licensee's name, address, and telephone number of record, and the authorizations will be sent to this address. The Assignee is the party that will become the new Licensee if the application is granted. In an application for consent to transfer control of the License, the Transferee is the party that will have a controlling interest in the Licensee.

Item 67 This item indicates the legal entity type of the Assignee or Transferee. Select Individual, Unincorporated Association, Trust, Government Entity, Corporation, Limited Liability Company, General Partnership, Limited Partnership, Limited Liability Partnership, Consortium, or Other. When selecting 'Other', provide a description of the legal entity.

<u>Item 68</u> Enter the Assignee/Transferee's ten-digit FRN assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission. The FRN can be obtained electronically through the FCC website at <u>http://www.fcc.gov</u> or by manually submitting FCC 160. FCC 160 is available for downloading from <u>http://www.fcc.gov/formpage.html</u>, by calling (800) 418-FORM (3676), or from FCC's Fax Information System by dialing (202) 418-0177. Failure to provide the FRN will prevent the Commission from processing the application.

Items 69-70 Complete either Item 69 or Item 70, depending on whether the Assignee/Transferee is an individual or company, respectively.

Note: The full legal name is required for Items 69 and 70.

Item 71 If completing Item 70, enter the contact person for the Assignee/Transferee.

Item 72 Enter the real party in interest's ten-digit FRN assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission. The FRN can be obtained electronically through the FCC website at <a href="http://www.fcc.gov">http://www.fcc.gov</a> or by manually submitting FCC 160. FCC 160 is available for downloading from <a href="http://www.fcc.gov/formpage.html">http://www.fcc.gov</a> or by manually submitting FCC 160. FCC 160 is available for downloading from <a href="http://www.fcc.gov/formpage.html">http://www.fcc.gov/formpage.html</a>, by calling (800) 418-FORM (3676), or from FCC's Fax Information System by dialing (202) 418-0177. If the Assignee or Transferee is also the real party in interest, enter the Assignee's or Transferee's FRN in this item. Failure to provide the FRN will prevent the Commission from processing the application.

Item 73 The Assignee or Transferee must identify the real party (parties) in interest. If the Assignee or Transferee is also the real party in interest, enter the Assignee's or Transferee's name in this item. If a party other than the Assignee or Transferee is the real party in interest (*e.g.*, a parent or other controlling entity), enter that party's name in this item. If there is more than one real party in interest, attach an exhibit detailing all parties in interest.

The real party in interest is defined as a person who "has an ownership interest, or will be in a position to actually or potentially control the operation of the station." Astroline Communications Co. Ltd. v. FCC, 857 F.2d 1556, 1564 (D.C. Cir. 1988); see also In Re Applications of Georgia Public Telecommunications Commission, et al., MM Docket No. 89-337, 7 FCC Rcd 7996 (1992); In Re Applications of Madalina Broadcasting, et al., MM Docket No. 91-100, 8 FCC Rcd 6344 (1993).

<u>Items 74-79</u> Enter the address and telephone number of the person to whom the FCC should send correspondence. You may enter a post office box number in Item 74 or a street address in Item 75, or enter information for both items. Enter the city, state, and zip code in Items 76, 77, and 78, respectively. Refer to FCC Form 603 Main Form Instructions, Appendix I, for a list of valid state, jurisdiction, and area abbreviations. Enter a telephone number, including area code, in Item 79.

Items 80 and 81 Enter the Assignee/Transferee fax number and e-mail address, if desired and available.

Failure to respond to FCC correspondence sent to the address of record may result in dismissal of an application, liability for forfeiture, or revocation of an authorization.

#### Demographics of Assignee/Transferee (Optional)

<u>Item 82</u> The information is optional and is requested for informational purposes only. Responses to this item will in no way affect processing of applications.

#### Assignee/Transferee Contact Representative

<u>Items 83-93</u> These items identify the contact representative for the Assignee/Transferee, if different from the Assignee/Transferee. This is usually the headquarters office of a large company, the law firm or other representative of the Assignee/Transferee, or the person or company that prepared or submitted the application on behalf of the Assignee/Transferee. If there is a question about the application, an FCC representative will communicate with the contact representative.

If the contact representative is the same as the Assignee/Transferee, check the box and do not complete the remaining items in this section. If the contact representative is not the same as the Assignee/Transferee, then provide the information and complete this section as follows:

- Either the Individual Name or the Company Name is required.
- If Individual Name is completed, then Company Name and Attention To are not required.
- If Company Name is completed, then either an Individual Name or the Attention To is required.
- Either a PO Box or a Street Address is required. Both may be provided.
- City, State and Zip Code are required.
- Telephone Number is required (including area code).
- FAX Number and E-Mail Address are optional.

#### **Ownership Disclosure Information**

Item 94a Enter 'Y' if the Assignee/Transferee is required to file FCC Form 602, Ownership Disclosure Information for the Wireless Telecommunications Services.

Item 94b If 94a is 'Y', provide the File Number of the FCC Form 602 submitted in conjunction with this application or already on file with the FCC.

#### Alien Ownership Questions

These items enable the FCC to determine whether an Applicant is eligible under Section 310(a) and (b) of the Communications Act of 1934, as amended, to hold or have ownership interests in a License. The Assignee/Post-transfer Licensee is required to answer these questions only if it is filing FCC Form 603 for one of the following purposes indicated in Item 1: Assignment of Authorization or Transfer of Control. An Assignee/Post-transfer Licensee using FCC Form 603 for any other purpose is not required to answer these questions. Any applicant that answers 'Y' to Items 96 -99a must provide an attachment explaining the circumstances. The FCC will otherwise dismiss the application without further consideration.

<u>Item 95</u> The Assignee/Post-transfer Licensee filing FCC Form 603 for one of the purposes indicated above must answer Item 95. The FCC cannot grant an authorization to a foreign government or the representative of a foreign government. Therefore, if the true and correct answer to Item 95 is 'Y', the Assignee/Post-transfer Licensee is not eligible to hold a license and the FCC will dismiss the application without further consideration.

<u>Items 96-98</u> The FCC cannot grant an authorization to provide common carrier, broadcast, or aeronautical fixed service to any Applicant for which the true and correct answer to any of Items 96 - 98 is 'Y'. Any applicant that answers 'Y' to Items 96 - 98 must provide an attachment explaining why the requested license(s) is exempt from the prohibitions contained in Section 310(b)(1)-(3) of the Communications Act of 1934. The FCC will otherwise dismiss the application without further consideration.

Item 99a Enter 'Y' if the Assignee/Post-transfer Licensee is directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country. Otherwise, enter 'N'. If the answer is 'Y', and if the requested license(s) authorizes the provision of a common carrier, broadcast, or aeronautical fixed service, it is necessary for the Assignee/Post-transfer Licensee to have or obtain approval of the Assignee/Post-transfer Licensee's indirect foreign ownership pursuant to Section 310(b)(4) of the Communications Act of 1934. Accordingly, any applicant that answers 'Y' to Item 99a must provide an attachment explaining the circumstances. The FCC will otherwise dismiss the application without further consideration. In the attachment, the Applicant must demonstrate either that (i) the requested license(s) is exempt from the provisions of Section 310(b)(4), or (ii) allowing the Assignee/Post-transfer Licensee to hold the requested license is consistent with the Commission's policies pursuant to Section 310(b)(4). If the Applicant cannot demonstrate that the requested license(s) is exempt from the provisions of Section 310(b)(4), it must include in its Section 310(b)(4) showing a description of the Assignee/Posttransfer Licensee indirect foreign ownership, along with information regarding any approvals of the foreign ownership obtained from the Commission. In general, the Commission has indicated that there is a strong presumption that indirect foreign ownership of common carrier radio Licensees by entities whose home markets are in countries that are members of the World Trade Organization (WTO) does not raise competitive concerns. If more than 25 percent of the ownership of an entity that directly or indirectly controls a common carrier radio Licensee is attributable to parties whose home markets are in non-WTO member countries, the presumption does not apply, and the Commission will evaluate whether those markets offer effective competitive opportunities to U.S. investors in the same service sector. See Rules and Policies on Foreign Participation in the U.S. Telecommunications Market, IB Docket No. 97-142, Report and Order and Order on Reconsideration, FCC 97-398, 12 FCC Rcd 23,891 ¶¶ 97-118, 131 (1997).

For additional guidance on how the Commission analyzes foreign ownership issues, see Foreign Ownership Guidelines for FCC Common Carrier and Aeronautical Radio Licenses, DA 04-3610, 19 FCC Rcd 22,612 (IB 2004), corrected by Erratum, DA 06-1242 FCC Rcd 6484 (IB 2006).

<u>Item 99b</u> Enter 'Y' if the Assignee/Post-transfer Licensee has received a ruling(s) under Section 310(b)(4) of the Communications Act with respect to the same radio service(s) and geographic coverage area(s) involved in this application. Otherwise, enter 'N'.

If the answer to 99b is 'Y', include in the attachment required by Item 99a the citation(s) of the applicable declaratory ruling(s) by DA/FCC number, the FCC Record citation, if available, release date, and any other identifying information.

If the answer to 99b is 'N', attach as an exhibit, a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act of 1934. It is not necessary to file a request for a foreign ownership ruling if the Applicant includes in the attachment required by Item 99a a showing that the requested license(s) is exempt from the provisions of Section 310(b)(4).

#### **Basic Qualification Questions**

Items 100-102 These items enable the FCC to determine whether an Assignee/Transferee is eligible under Sections 310(d) and 308(b) of the Communications Act of 1934, as amended, to hold or have ownership interest in a station license. The Assignee/Transferee is required to answer these questions only if it is filing FCC Form 603 for one of the following purposes indicated in Item 1: Assignment of Authorization or Transfer of Control. An Assignee/Transferee using FCC Form 603 for any other purpose is not required to answer these questions. If the answer to any one or more of Items 100-102 is 'Y', attach as an exhibit a statement explaining the circumstances and a statement giving the reasons why the Assignee/Transferee believes that grant of the application would be in the public interest notwithstanding the actual or alleged misconduct. If the Assignee or Transferee responds 'Y' to any question and has previously provided a statement and explanation regarding the circumstances as an attachment to a prior application filed in ULS, and the facts and circumstances are unchanged, the Applicants may refer to the previous application by identifying the application file number and indicating the disposition of the prior application.

#### Assignor/Transferor Certification Statements

By signing this form, the Assignor/Transferor certifies that the statements listed in this section are true, complete, correct, and made in good faith.

<u>Items 103-105</u> These items must be completed. To be acceptable for filing, applications and amendments must be signed in accordance with Part 1 of the FCC rules. The signor must be a person authorized to sign the application. Paper originals of applications must bear an original signature. On paper originals, neither rubber-stamped nor photocopied signatures are acceptable. For filers filing electronically via ULS, the electronic signature shall consist of the name of the person authorized to sign typed on the application as a signature.

#### **Assignee/Transferee Certification Statements**

By signing this form, the Assignee/Transferee certifies that the statements listed in this section are true, complete, correct, and made in good faith.

<u>Items 106-108</u> These items must be completed. To be acceptable for filing, applications and amendments must be signed in accordance with Part 1 of the FCC rules. The signor must be a person authorized to sign the application. Paper originals of applications must bear an original signature. On paper originals, neither rubber-stamped nor photocopied signatures are acceptable. For filers filing electronically via ULS, the electronic signature shall consist of the name of the person authorized to sign typed on the application as a signature.

#### Authorizations To Be Assigned or Transferred

If this is an application for full Assignment or a Transfer of Control, use this section to identify the authorizations to be assigned (complete only Items 109 (Call Sign), 110 (Radio Service) and 116 (Constructed)). Complete at least one entry in this section and use a separate entry for each authorization. If necessary, attach additional copies of this page to list more authorizations.

If this is an application for a partial Assignment in a site-specific service, use this section to identify the authorizations to be assigned (complete Items 109-116, as appropriate). Complete at least one entry in this section and use a separate entry for each authorization. If necessary, attach additional copies of this page to list more authorizations.

<u>Item 109</u> In this item list the call signs of the authorizations to be assigned or transferred. Call signs are located on FCC Authorizations.

**Note:** Assigning call signs without specifying which specific locations, paths (Microwave Services only), or frequencies are to be assigned for that call sign will result in all locations, paths, and frequencies for that call sign being assigned. Use Item 111 to specify which (if any) specific locations are to be assigned. Use Item 112 to specify which (if any) specific paths (Microwave Services only) are to be assigned. Use Items 113, 114 and 115 to specify which (if any) specific frequencies are to be assigned.

Item 110 In this item list the Radio Service of the call sign to be assigned.

Item 111 In this item list the location numbers to be assigned. Location numbers are located on FCC authorizations.

**Note:** Assigning locations without specifying which specific frequencies are to be assigned for that location will result in all frequencies at that location being assigned. Use Items 113, 114 and 115 to specify which (if any) specific frequencies are to be assigned.

<u>Item 112</u> In this item list the path numbers to be assigned (Microwave Services only). Path numbers are located on FCC Authorizations.

**Note:** Assigning paths without specifying which specific frequencies are to be assigned for that path will result in all frequencies on that path being assigned. Use Items 113, 114 and 115 to specify which (if any) specific frequencies are to be assigned.

Item 113 In this item list the frequency number to be assigned. Frequency numbers are located on FCC Authorizations.

<u>Items 114 and 115</u> In these items list the frequencies, in Megahertz (MHz), to be assigned. Enter the center frequency, or the lower frequency of a frequency band, in Item 114. If applicable, enter the upper frequency of a frequency band in Item 115. Frequencies are located on FCC authorizations or can be located by accessing the Universal Licensing System's license search.

Item 116 Enter 'Y' if the facilities have been constructed. Otherwise, enter 'N'.

# Instructions for Schedule for Licensees that Received Bidding Credits or Participate in the Installment Payment Plan, or Involving Licenses Won in Closed Bidding FCC Form 603, Schedule A

FCC Form 603 Schedule A is a supplementary schedule. Complete this schedule when an Assignment or Transfer involves a license(s) that was originally awarded through the competitive bidding process and the original Licensee or current Licensee obtained installment payments, bidding credits, or was otherwise subject to special provisions applicable to entrepreneurs, and closed bidding licenses. This schedule establishes whether the Assignee (Assignment of Authorization) or the post-transaction Licensee (Transfer of Control) is eligible for the same special provisions as the current Licensee, or whether unjust enrichment provisions or other restrictions apply.

#### **Bidding Credits**

<u>Item 1</u> Enter 'Y' if the full amount of bidding credits awarded with regard to each subject license has been paid as part of unjust enrichment payment(s) in previous transaction(s). Otherwise, enter 'N'. If 'Y' is entered, Item 2 is not required to be completed.

<u>Item 2</u> Check the appropriate selection: a) the Applicant qualifies for the same designated entity status as the current Licensee; b) the Applicant qualifies for a different designated entity status than the current Licensee; or, c) the Applicant does not qualify for any designated entity status.

If either selection 'a' or 'b' is checked, attach an exhibit that includes revenue information pursuant to the Commission's Rules.

#### **Installment Payments**

Item 3 Enter 'Y' if all installment payments for each subject license have been paid in full. Otherwise, enter 'N'. If 'Y' is entered, Item 4 is not required to be completed.

<u>Item 4</u> Check the appropriate selection: a) the Applicant qualifies for the same designated entity status as the current Licensee; b) the Applicant qualifies for a different designated entity status than the current Licensee or, c) the Applicant does not qualify for the installment payment plan.

If either selection 'a' or 'b' is checked, attach an exhibit that includes revenue and asset information pursuant to the Commission's Rules.

#### Closed Bidding Licenses

<u>Item 5</u> Enter 'Y' if construction notifications have been submitted for each of the subject licenses. Otherwise, enter 'N'. If 'Y' is entered, Item 6 is not required to be completed.

Item 6 Check the appropriate selection: a) the Applicant qualifies for closed bidding, or b) the Applicant does not qualify for closed bidding.

If selection 'a' is checked, attach an exhibit that includes revenue and asset information pursuant to the Commission's Rules.

#### **Revenue and Asset Information for Applicant**

<u>Item 7</u> If filing an Amendment application, check the block if modifying the Revenue and Asset Information from what was provided on the original filing. When modifying the data that was provided on the original filing, only enter the items that have changed. This item is not required to be completed on the original filing.

#### **Gross Revenue Disclosure**

#### Most Recent Reportable Year

<u>Item 8a</u> Enter 'Y' if the Applicant and any predecessors-in-interest were in existence and had gross revenues for the most recent reportable year. If 'Y', complete Items 8b and 8c. Enter 'N' if the Applicant and any predecessors-in-interest were not in existence for the most recent reportable year and explain why in an attachment.

#### One Year Prior to Most Recent Reportable Year

Item 9a Enter 'Y' if the Applicant and any predecessors-in-interest were in existence and had gross revenues for one year prior to the most recent reportable year. If 'Y', complete Items 9b and 9c. Enter 'N' if the Applicant and any predecessors-in-interest were not in existence for one year prior to the most recent reportable year and explain why in an attachment.

#### Two Years Prior to Most Recent Reportable Year

<u>Item 10a</u> Enter 'Y' if the Applicant and any predecessors-in-interest were in existence and had gross revenues for two years prior to the most recent reportable year. If 'Y', complete Items 10b and 10c. Enter 'N' if the Applicant and any predecessors-in-interest were not in existence for two years prior to the most recent reportable year and explain why in an attachment.

#### Average Gross Revenue

Item 11 The Universal Licensing System will calculate the average gross revenue for the reported years provided in Items 8, 9 and 10.

#### Asset Disclosure

Item 12 Enter the total assets disclosed as of the application filing date.

#### **Financial Statements**

<u>Item 13</u> Check if the Applicant used audited financial statements **or** unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by Applicant's chief financial officer or the equivalent.

#### Revenue and Asset Information for Disclosable Interest Holder (DIH)

<u>Item 14</u> Select the proper block to Add, Modify, or Delete a DIH. If Adding, complete Items 15 through 21. If Modifying, enter only the items changed. If Deleting, complete the Entity Name or the Individual Name and the FRN of the DIH. Modify and Delete are used for Amendments of a previously filed application. If necessary, attach additional copies of this page to list more DIHs.

#### Disclosable Interest Holder

Item 15 Select the proper block for either Entity Name or Individual name of the Disclosable Interest Holder and provide Entity Name or Individual name and the FCC Registration Number (FRN) of the DIH.

#### **Gross Revenue Disclosure**

#### Most Recent Reportable Year

Item 16a Enter 'Y' if the DIH and any predecessors-in-interest were in existence and had gross revenues for the most recent reportable year. If 'Y', complete Items 16b and 16c. Enter 'N' if the DIH and any predecessors-in-interest were not in existence for the most recent reportable year and explain why in an attachment.

#### One Year Prior to Most Recent Reportable Year

Item 17a Enter 'Y' if the DIH and any predecessors-in-interest were in existence and had gross revenues for one year prior to the most recent reportable year. If 'Y', complete Items 17b and 17c. Enter 'N' if the DIH and any predecessors-in-interest were not in existence for one year prior to the most recent reportable year and explain why in an attachment.

#### Two Years Prior to Most Recent Reportable Year

Item 18a Enter 'Y' if the DIH and any predecessors-in-interest were in existence and had gross revenues for two years prior to the most recent reportable year. If 'Y', complete Items 18b and 18c. Enter 'N' if the DIH and any predecessors-in-interest were not in existence for two years prior to the most recent reportable year and explain why in an attachment.

#### Average Gross Revenue

Item 19 The Universal Licensing System will calculate the average gross revenue for the reported years provided in Items 16, 17 and 18.

#### Asset Disclosure

Item 20 Enter the total assets disclosed as of the application filing date.

#### **Financial Statements**

Item 21 Check if the DIH used audited financial statements **or** unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by DIH's chief financial officer or the equivalent.

#### **Revenue and Asset Information for Affiliate**

<u>Item 22</u> Select the proper block to Add, Modify, or Delete an Affiliate. If Adding, complete Items 23 through 29. If Modifying, enter only the items changed. If Deleting, complete the Entity Name or the Individual Name and the FRN of the Affiliate. Modify and Delete are used for Amendments of a previously filed application. If necessary, attach additional copies of this page to list more Affiliates.

#### Affiliate

Item 23 Select the proper block for either Entity Name or Individual name of the Affiliate and provide Entity Name or Individual name and the FCC Registration Number (FRN) of the Affiliate.

#### Gross Revenue Disclosure

#### Most Recent Reportable Year

<u>Item 24a</u> Enter 'Y' if the Affiliate and any predecessors-in-interest were in existence and had gross revenues for the most recent reportable year. If 'Y', complete Items 24b and 24c. Enter 'N' if the Affiliate and any predecessors-in-interest were not in existence for the most recent reportable year and explain why in an attachment.

#### One Year Prior to Most Recent Reportable Year

Item 25a Enter 'Y' if the Affiliate and any predecessors-in-interest were in existence and had gross revenues for one year prior to the most recent reportable year. If 'Y', complete Items 25b and 25c. Enter 'N' if the Affiliate and any predecessors-in-interest were not in existence for one year prior to the most recent reportable year and explain why in an attachment.

#### Two Years Prior to Most Recent Reportable Year

Item 26a Enter 'Y' if the Affiliate and any predecessors-in-interest were in existence and had gross revenues for two years prior to the most recent reportable year. If 'Y', complete Items 26b and 26c. Enter 'N' if the Affiliate and any predecessors-in-interest were not in existence for two years prior to the most recent reportable year and explain why in an attachment.

#### Average Gross Revenue

Item 27 The Universal Licensing System will calculate the average gross revenue for the reported years in Items 24, 25 and 26.

#### Asset Disclosure

Item 28 Enter the total assets disclosed as of the application filing date.

#### **Financial Statements**

Item 29 Check if the Affiliate used audited financial statements **or** unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by Affiliate's chief financial officer or the equivalent.

#### Revenue and Asset Information for Entities With Whom the Applicant Has an Attributable Material Relationship (AMR Entity)

<u>Item 30</u> Select the proper block to Add, Modify, or Delete an AMR Entity. If Adding, complete Items 31 through 37. If Modifying, enter only the items changed. If Deleting, complete the Entity Name or the Individual Name and the FRN of the AMR Entity. Modify and Delete are used for Amendments of a previously filed application. If necessary, attach additional copies of this page to list more AMR Entities.

#### Entity With Whom the Applicant Has an Attributable Material Relationship

<u>Item 31</u> Select the proper block for either Entity Name or Individual name of the AMR Entity and provide Entity Name or Individual name and the FCC Registration Number (FRN) of the AMR Entity.

#### Gross Revenue Disclosure

#### Most Recent Reportable Year

<u>Item 32a</u> Enter 'Y' if the AMR Entity and any predecessors-in-interest were in existence and had gross revenues for the most recent reportable year. If 'Y', complete Items 32b and 32c. Enter 'N' if the AMR Entity and any predecessors-in-interest were not in existence for the most recent reportable year and explain why in an attachment.

#### One Year Prior to Most Recent Reportable Year

Item 33a Enter 'Y' if the AMR Entity and any predecessors-in-interest were in existence and had gross revenues for one year prior to the most recent reportable year. If 'Y', complete Items 33b and 33c. Enter 'N' if the AMR Entity and any predecessors-in-interest were not in existence for one year prior to the most recent reportable year and explain why in an attachment.

#### Two Years Prior to Most Recent Reportable Year

Item 34a Enter 'Y' if the AMR Entity and any predecessors-in-interest were in existence and had gross revenues for two years prior to the most recent reportable year. If 'Y', complete Items 34b and 34c. Enter 'N' if the AMR Entity and any predecessors-in-interest were not in existence for two years prior to the most recent reportable year and explain why in an attachment.

#### Average Gross Revenue

Item 35 The Universal Licensing System will calculate the average gross revenue for the reported years in Items 32, 33 and 34.

#### Asset Disclosure

Item <u>36</u> Enter the total assets disclosed as of the application filing date.

#### **Financial Statements**

Item 37 Check if the AMR Entity used audited financial statements **or** unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by AMR Entity's chief financial officer or the equivalent.

#### **Closed Bidding/Designated Entity Eligibility**

#### **Total Gross Revenues for Most Recent Reportable Year**

<u>Item 38</u> The Universal Licensing System will calculate the total gross revenue for the most recent reportable year and the year end date.

#### Total Revenues for One Year Prior to Most Recent Reportable Year

Item 39 The Universal Licensing System will calculate the total gross revenue for one year prior to most recent reportable year and the year end date.

#### Total Revenues for Two Years Prior to Most Recent Reportable Year

<u>Item 40</u> The Universal Licensing System will calculate the total gross revenue for two years prior to most recent reportable year and the year end date.

#### **Total Aggregate Average Gross Revenues for Designated Entity**

Item 41 The Universal Licensing System will calculate the aggregate average gross revenue for the designated entity.

#### Total Aggregate Average Gross Revenues for Closed Bidding

Item 42 The Universal Licensing System will calculate the aggregate average gross revenue for the closed bidding.

#### **Total Assets Disclosure**

Item 43 The Universal Licensing System will calculate the total assets for the closed bidding.

#### **Certifications**

By signing the Main Form, FCC Form 603, the Assignor/Transferor/Assignee/Transferee certifies that the applicable statements listed in this section are true, complete, correct, and made in good faith.

# Instructions for Schedule for Defined Geographic Areas To Be Partitioned or for Spectrum To Be Disaggregated FCC Form 603, Schedule B

FCC Form 603 Schedule B is a supplementary schedule. Complete this Schedule when an Assignment involves the partitioning or disaggregation of a geographic-area license. Complete a separate schedule for each partitioned area or if additional space is needed to depict the spectrum that is being disaggregated.

Item 1 Enter the Call Sign of the license that is to be partitioned or disaggregated.

#### **Partitioned Area**

Item 2 Enter the partitioned area if the partitioned area involves FCC-defined geographic boundaries (*i.e.*, FCC licensing boundaries (Major Trading Areas (MTAs), Basic Trading Areas (BTAs), etc.) or county boundaries.

In some cases, more than one geographic area exists with the same name in the same state (*i.e.*, an independent city with the same name as a county in the same state). To partition these independent cities, you must enter its 5 digit FIPS code (2-digit state FIPS code + 3-digit county FIPS code). For example, in Virginia there is a Fairfax County and a Fairfax City. Fairfax City is an independent city and is not affiliated with Fairfax County. To partition the city of Fairfax, you must enter its FIPS code, 51600, as shown in the table below. To partition the county of Fairfax, you could enter its FIPS code or 'Fairfax, VA'. For a listing of FIPS codes, refer to "www.census.gov/datamap/fipslist/AllSt.txt".

| INDEPENDENT CITY NAME | FIPS CODE |
|-----------------------|-----------|
| Baltimore MD          | 24510     |
| St. Louis, MO         | 29510     |
| Bedford, VA           | 51515     |
| Fairfax, VA           | 51600     |
| Franklin, VA          | 51620     |
| Richmond, VA          | 51760     |
| Roanoke, VA           | 51770     |

<u>Item 3</u> If the area to be partitioned is undefined (*e.g.*, cannot be described using FCC-defined geographic boundaries or county boundaries), describe its periphery by completing Schedule C. Assign a unique number to each copy of Schedule C that is filed. Enter this number in both the Number field at the top of Schedule C and Item 3 on Schedule B.

Item 4 Enter the population of the partitioned area.

#### Spectrum Disaggregated

<u>Item 5</u> Authorized spectrum blocks can be disaggregated by assigning one or more frequency blocks. To assign a frequency block, enter its lower value in MHz in the Lower Frequency field and enter its upper value in MHz in the Upper Frequency field. In this table, complete as many entries as you need to depict the disaggregation completely.

#### **Coverage Requirements - Partitioning**

Item 6 Check the selection that indicates which coverage requirements have been agreed upon by the partitioner and partitionee.

#### **Coverage Requirements - Disaggregation**

Item 7 Check the selection that indicates which coverage requirements have been agreed upon by the disaggregator and disaggregatee.

# Instructions for Schedule for Undefined Geographic Areas To Be Partitioned FCC Form 603, Schedule C

FCC Form 603 Schedule C is a supplementary schedule. This schedule must be completed and attached if an undefined area is to be partitioned, as specified by Item 3 on Schedule B. Complete and attach a copy of Schedule C for *each* Call Sign that is being partitioned or disaggregated. If multiple undefined areas are requested, *each* undefined area should have a corresponding Schedule C.

This schedule further delineates geographic areas that have not been defined by the FCC. It is used to enter the coordinates of locations that describe the periphery of a geographic area to be partitioned. Specifically, enter up to 300 pairs of latitude/longitude coordinates, one pair for every 3 degrees azimuth around the periphery (you may use additional copies of Page 2 if more space is needed). Coordinates of the specified locations must be referenced to the North American Datum of 1983 (NAD83).

**Note:** If the area is a defined geographic shape, the Applicants can provide fewer than 300 coordinates, in which case the FCC will assume that these coordinate points are joined by straight lines. For example, a rectangle can be described by four coordinates, a hexagon by six coordinates, and so on.

Number: At the top of this schedule, enter the same number that has been specified in Item 3 of Schedule B.

Latitude: In this column, enter the latitudes of locations using the format *DD-MM-SS.S-D*, where the degrees (*DD*) term can have a value in the range of 0 to 72, minutes (*MM*) can range from 0 to 59, seconds (*SS.S*) can range from 0 to 59.9, and the direction (*D*) term is either N for North or S for South.

Longitude: In this column, enter the corresponding longitudes of locations using the format *DDD-MM-SS.S-D*, where the degrees (*DDD*) term can have a value in the range of 64 to 180, minutes (*MM*) can range from 0 to 59, seconds (*SS.S*) can range from 0 to 59.9, and the direction (*D*) term is either E for East or W for West.

# Instructions for Schedule for Notification of Consummation of an Assignment of Authorization or a Transfer of Control FCC Form 603, Schedule D

FCC Form 603 Schedule D is a supplementary schedule. This schedule is used to notify the FCC that, within the required time period, either an Assignment of Authorization or a Transfer of Control has been consummated. The FCC Form 603 Main Form must be filed in conjunction with this schedule and signed by either the Assignee (Assignment of Authorization) or the Transferee (Transfer of Control).

Item 1 Provide the file number of the previously consented to Assignment of Authorization or Transfer of Control application.

<u>Item 2</u> Provide the date that the previously consented to Assignment of Authorization or Transfer of Control was actually consummated.

# Instructions for Schedule for Request for Extension of Time to Consummate an Assignment of Authorization or a Transfer of Control FCC Form 603, Schedule E

FCC Form 603 Schedule E is a supplementary schedule. This schedule is used to request additional time to consummate an Assignment of Authorization or a Transfer of Control. The FCC Form 603 Main Form must be filed in conjunction with this schedule and signed by either the Assignor (Assignment of Authorization) or the Transferor (Transfer of Control).

Item 1 Provide the file number of the previously consented to Assignment of Authorization or Transfer of Control application.

<u>Item 2</u> Provide the requested consummation date for the Assignment of Authorization or Transfer of Control application. In addition, attach an exhibit explaining the reason for the extension request.

# STATE TABLE

# Abbreviations for States, Jurisdictions, and Areas

| ND<br>OK<br>PA<br>RI<br>SC<br>SD<br>TN<br>TX<br>UT<br>VA<br>WA<br>WV<br>WI<br>WV | North Dakota<br>Ohio<br>Oklahoma<br>Oregon<br>Pennsylvania<br>Rhode Island<br>South Carolina<br>South Dakota<br>Tennessee<br>Texas<br>Utah<br>Vermont<br>Virginia<br>Washington<br>West Virginia<br>Wisconsin<br>Wyoming                                   |
|--|--|
| AS<br>GU<br>MP<br>PR<br>UM   | American Samoa<br>Guam<br>Northern Mariana Islands<br>Puerto Rico<br>U.S. Territories: (Baker Island, Howland Island,<br>Jarvis Island, Johston Atoll, Kingman Reef, Midway<br>Island, Navassa Island, Palmyra Atoll and Wake<br>Island)<br>Virgin Islands |
| AA<br>AE<br>AP   | Armed Forces-Americas (excluding Canada)<br>Armed Forces-(Europe, Middle East, Africa,<br>Canada)<br>Armed Forces-Pacific  |

FCC Form 603

Approved by OMB Main Form

# FCC Application for Assignments of Authorization and Transfers of Control:

# Wireless Telecommunications Bureau Public Safety and Homeland Security Bureau

3060 - 0800 See instructions for public burden estimate

#### **General Information**

| 1) A   | pplication Purpose (Select only on   | e) ( )  |   |              |   |               |            |
|--------|--|---|---|--------------|---|---------------|------------|
|        | A - Assignment of Authorization<br>C - Transfer of Control   | <b>AM</b> - Amendment<br><b>WD</b> - Withdrawal | NT - Required Notification (For Consumma<br>EX - Request for Extension of Time (To Co       | 0            |   | ,             | fer)       |
|        | f this application is for an Amendme<br>consented to application currently or  |   | (WD), enter the File Number of the pending or   | File Number: |   |               |            |
| s s    | 3a) Is this application for Assignment of Authorization or Transfer of Control part of a series of applications<br>involving other wireless license(s) held by the Licensee, affiliates of the Licensee ( <i>e.g.</i> , parents,<br>subsidiaries, or commonly-controlled entities), or third parties that are not included on this application and<br>for which Commission approval or notification is required? |   |   |              | ( | ) <u>Y</u> es | <u>N</u> o |
| 3b) If | the answer to 3a is 'Y', is this filing  | the lead application?                           |   |              | ( | ) <u>Y</u> es | <u>N</u> o |
| 3c) If | the answer to 3b is 'N', provide the   | File Number of the lead a                       | application.  | File Number: |   |               |            |
|        |  |   | ransfer of Control involve the assignment or mmission approval or notification is required? |              | ( | ) <u>Y</u> es | <u>N</u> o |
| 4) Ai  | re attachments (other than associat  | ed schedules) being filed                       | d with this application?  |              | ( | ) <u>Y</u> es | <u>N</u> o |

#### **Fees and Waivers**

| 5a) | Is the Applicant exempt from FCC application fees?  |                          | ( | ) <u>Y</u> es | <u>N</u> o |
|-----|---|--------------------------|---|---------------|------------|
|     | If 'Y', attach an exhibit demonstrating how the Applicant is exempt from FCC application fees.  |                          |   |               |            |
| 5b) | Is a waiver/deferral of the FCC application fees being requested and the application fees are not being submitted in conjunction with this application? |                          | ( | ) <u>Y</u> es | <u>N</u> o |
|     | If 'Y', attach a date-stamped copy of the request for waiver/deferral of the FCC application fees.  |                          |   |               |            |
| 6a) | Does this application include a request for waiver of the Commission's Rules (other than a request for application fee waivers)?                        |                          | ( | ) <u>Y</u> es | <u>N</u> o |
|     | If 'Y', attach an exhibit specifying the rule section(s) for which a waiver is being requested and including a justification for the waiver request.    |                          |   |               |            |
| 6b) | If 6a is 'Y', enter the number of rule sections involved.   | Number of Rule Sections: |   |               |            |

#### **Additional Transaction Information**

| 7a) Has this application for Assignment of Authorization or Transfer of Control already occurred?  |                             | ( | ) <u>Y</u> es | <u>N</u> o |
|--|-----------------------------|---|---------------|------------|
| 7b) If the response to Item 7a is 'Y', provide the date the event occurred:  | (MM/DD/YYYY)                | 1 | /             |            |
| 8) The Assignment of Authorization or Transfer of Control is:  | () Voluntary<br>Involuntary |   | (             | )          |
| 9a) Is this application a pro forma Assignment of Authorization or Transfer of Control?  |                             | ( | ) <u>Y</u> es | <u>N</u> o |
| 9b) If Item 9a is 'Y', is this a post-consummation notification that is being filed under the Commission's forbearance procedures pursuant to Section 1.948(c)(1) of the Commission's Rules? |                             | ( | ) <u>Y</u> es | <u>N</u> o |
| 10a) Does this application involve the partitioning and/or disaggregation of geographic-area licenses?<br>If 'Y', complete Schedule B and, if applicable, Schedule C.                        |                             | ( | ) <u>Y</u> es | <u>N</u> o |
| 10b) If 10a is 'N', does this application involve the partial assignment of site-based licenses?   |                             | ( | ) <u>Y</u> es | <u>N</u> o |

| 11) How will/has the Assignment of Authorization or Transfer of Control be/been accomplished? Select One: ( ) |                     |                               |  |  |  |  |  |
|---|---------------------|-------------------------------|--|--|--|--|--|
| <u>S</u> ale or other assignment of assets  | <u>C</u> ourt order | Reorganization or liquidation |  |  |  |  |  |
| Transfer of stock or other ownership interests  |                     |                               |  |  |  |  |  |
| Other (voting trust agreement, management contract, etc.):  |                     |                               |  |  |  |  |  |
|   |                     |                               |  |  |  |  |  |

Designated Entity Information (If 12a, 12b or 12c is 'Y', Schedule A is required to be completed.)

| 12a) Enter 'Y' if this application for Assignment of Authorization or Transfer of Control involve any licenses that were originally granted before April 25, 2006, and that were awarded with bidding credits within the last five years and/or any licenses that were originally granted after April 25, 2006, and that were awarded with bidding credits within the last ten years? Otherwise, enter 'N'. | <u>N</u> o | ( | ) <u>Y</u> es |
|---|------------|---|---------------|
| The initial grant date is the date that the license was originally granted by the Commission after an auction, even if the license was acquired in the secondary market. The initial grant date is not the date on which the Commission granted an assignment or transfer of control of the license.  |            |   |               |
| If the response to this item is 'Y', the licenses may be subject to the FCC's unjust enrichment rules. See Section 1.2111(d), (e) of the Commission's Rules. If the response to 12a is 'Y', Schedule A must be completed.   |            |   |               |
| 12b) Does this application for Assignment of Authorization or Transfer of Control involve any licenses that were<br>originally subject to the Commission's installment payment plan?  | <u>N</u> o | ( | ) <u>Y</u> es |
| 12c) Does this application for Assignment of Authorization or Transfer of Control involve any licenses that were originally granted pursuant to closed bidding within the last five years?  | <u>N</u> o | ( | ) <u>Y</u> es |

# **Competition Related Information**

| 13) Does this application for Assignment of Authorization or Transfer of Control involve a license(s) that may be used for interconnected mobile voice and/or data services that would, if assigned or transferred, create a geographic overlap with another license(s) in which the Assignee/Transferee already holds direct or indirect interests (of 10 percent or more), either as a Licensee or spectrum lessee/sublessee, and that also could be used to provide interconnected mobile voice and/or data services? | ( ) <u>Y</u> es <u>N</u> o |
|--|----------------------------|
| 14a) Does the Assignee/Transferee hold direct or indirect interests (of 10 percent or more) in any entity that<br>already has access to 10 MHz or more spectrum in the Cellular Radiotelephone, broadband PCS, or<br>Specialized Mobile Radio (SMR) services through license(s), lease(s), or sublease(s) in the same<br>geographic area?  | ( ) <u>Y</u> es <u>N</u> o |
| 14b) Would/does this application for Assignment of Authorization or Transfer of Control reduce the number of entities providing service (using spectrum in any of the three services listed in Item 14a) in the affected market(s)?  | ( ) <u>Y</u> es <u>N</u> o |

#### Broadband Radio Service and Educational Broadband Service Information

| 15a) Will the requested facilities be used to provide multichannel video programming service?   | ( ) <u>Y</u> es <u>N</u> o |
|---|----------------------------|
| 15b) If 15a is 'Y', does the Assignee/Transferee operate, control or have an attributable interest (as defined in<br>Section 27.1202 of the Commission's Rules) in a cable television system whose franchise area is<br>located within the geographic area of the requested facilities? | ( ) <u>Y</u> es <u>N</u> o |
| If 'Y', provide an exhibit explaining how the Assignee/Transferee complies with Section 27.1202 of the Commission's Rules or justifying a waiver of that rule. If a waiver of the Commission's Rule(s) is being requested, 6a must be answered 'Y'.                                     |                            |
| 16) Does the Assignee/Transferee comply with the programming requirements contained in Section<br>27.1203 of the Commission's Rules?  | ( ) <u>Y</u> es <u>N</u> o |
| If 'N', provide an exhibit explaining how the Assignee/Transferee complies with Section 27.1203 of the Commission's Rules or justifying a waiver of that rule. If a waiver of the Commission's Rule(s) is being requested, 6a must be answered 'Y'.                                     |                            |

# Assignor/Licensee Information

| 17) Assignor/Licensee is a(n): (Select One)   |            |        |          |         |  |  |         |  |
|---|------------|--------|----------|---------|--|--|---------|--|
| ( ) Individual ( ) Unincorporated Association ( ) Trust ( ) Government Entity ( ) Corporation ( ) Limited Liability Company<br>( ) General Partnership ( ) Limited Partnership ( ) Limited Liability Partnership ( ) Consortium |            |        |          |         |  |  |         |  |
| ( ) Other:  |            |        |          |         |  |  |         |  |
|   |            |        |          |         |  |  |         |  |
| 18) FCC Registration Number (FRN):  |            |        | _        |         |  |  |         |  |
| 19) First Name (if individual): MI: Last Name: Suffix:  |            |        |          |         |  |  | Suffix: |  |
| 20) Legal Entity Name (if not an individual):   |            |        |          |         |  |  |         |  |
| 21) Attention To:   |            |        |          |         |  |  |         |  |
| 22) P.O. Box:   | And<br>/Or | 23) \$ | Street A | ddress: |  |  |         |  |
| 24) City: 25) State: 26) Zip Code:  |            |        |          |         |  |  |         |  |
| 27) Telephone Number: 28) Fax Number:   |            |        |          |         |  |  |         |  |
| 29) E-Mail Address:   |            |        |          |         |  |  |         |  |

#### 30) Demographics of Assignor/Licensee (Optional):

| Race: |  | Ethr | nicity:                 | Gender: |         |  |  |
|-------|--|------|-------------------------|---------|---------|--|--|
| (     | )American Indian or Alaska Native          | (    | )Hispanic or Latino     | (       | )Male   |  |  |
| (     | )Asian                                     | (    | )Not Hispanic or Latino | (       | )Female |  |  |
| (     | )Black or African-American                 |      |                         |         |         |  |  |
| (     | )Native Hawaiian or Other Pacific Islander |      |                         |         |         |  |  |
| (     | )White                                     |      |                         |         |         |  |  |

# Assignor/Licensee Contact Representative (if other than Assignor/Licensee) (\_\_\_\_) Check here if same as Assignor/Licensee

| 31) First Name:       |            |         |                    | Last Name:               |  |  | Suffix: |  |
|-----------------------|------------|---------|--------------------|--------------------------|--|--|---------|--|
| 32) Company Name:     |            |         |                    |                          |  |  |         |  |
| 33) Attention To:     |            |         |                    |                          |  |  |         |  |
| 34) P.O. Box:         | And<br>/Or | 35) Str | 5) Street Address: |                          |  |  |         |  |
| 36) City:             | -          |         |                    | 37) State: 38) Zip Code: |  |  |         |  |
| 39) Telephone Number: |            |         | 40) Fax Number:    |                          |  |  |         |  |
| 41) E-Mail Address:   |            |         |                    |                          |  |  |         |  |

# Transferor Information (for Transfers of Control only)

| 42) Transferor is a(n): (Select One)   |            |       |           |         |  |  |  |  |  |
|--|------------|-------|-----------|---------|--|--|--|--|--|
| ( ) Individual ( )Unincorporated Association ( )Trust ( )Government Entity ( )Corporation ( )Limited Liability Company<br>( ) General Partnership ( ) Limited Partnership ( ) Limited Liability Partnership ( ) Consortium |            |       |           |         |  |  |  |  |  |
| ( ) Other:   |            |       |           |         |  |  |  |  |  |
|  |            |       |           |         |  |  |  |  |  |
| 43) FCC Registration Number (FRN):   |            |       |           |         |  |  |  |  |  |
| 44) First Name (if individual): MI: Last Name: Suffix:   |            |       |           |         |  |  |  |  |  |
| 45) Legal Entity Name (if not an individual):  |            |       |           |         |  |  |  |  |  |
| 46) Attention To:  |            |       |           |         |  |  |  |  |  |
| 47) P.O. Box:  | And<br>/Or | 48) S | Street Ad | ddress: |  |  |  |  |  |
| 49) City: 50) State: 51) Zip Code:   |            |       |           |         |  |  |  |  |  |
| 52) Telephone Number: 53) Fax Number:  |            |       |           |         |  |  |  |  |  |
| 54) E-Mail Address:  |            |       |           |         |  |  |  |  |  |

#### 55) Demographics of Transferor (Optional):

| Race: |  | Eth | nicity:                 | Gender: |         |  |  |
|-------|--|-----|-------------------------|---------|---------|--|--|
| (     | )American Indian or Alaska Native          | (   | )Hispanic or Latino     | (       | )Male   |  |  |
| (     | )Asian                                     | (   | )Not Hispanic or Latino | (       | )Female |  |  |
| (     | )Black or African-American                 |     |                         |         |         |  |  |
| (     | )Native Hawaiian or Other Pacific Islander |     |                         |         |         |  |  |
| (     | )White                                     |     |                         |         |         |  |  |

# Transferor Contact Representative (if other than Transferor) (\_\_\_\_) Check here if same as Transferor.

| 56) First Name:                               |  |  |  | Last Na   | me:        |               | Suffix: |  |
|---|--|--|--|-----------|------------|---------------|---------|--|
| 57) Company Name:                             |  |  |  |           |            |               |         |  |
| 58) Attention To:                             |  |  |  |           |            |               |         |  |
| 59) P.O. Box:     And     60) Street Address: |  |  |  |           |            |               |         |  |
| 61) City:                                     |  |  |  |           | 62) State: | 63) Zip Code: |         |  |
| 64) Telephone Number:                         |  |  |  | 65) Fax I | Number:    |               |         |  |
| 66) E-Mail Address:                           |  |  |  |           |            |               |         |  |

# Assignee/Transferee Information

| 67) Assignee/Transferee is a(n): (Select One)<br>( ) Individual ( )Unincorporated Association ( )Trust ( )Government Entity ( )Corporation ( )Limited Liability Company<br>( ) General Partnership ( ) Limited Partnership ( ) Limited Liability Partnership ( ) Consortium |            |         |        |         |      |  |  |  |          |
|---|------------|---------|--------|---------|------|--|--|--|----------|
| ( ) Other:  |            |         |        |         |      |  |  |  |          |
| 68) FCC Registration Number (FRN):  |            |         |        |         |      |  |  |  | <u> </u> |
| 69) First Name (if individual):   |            |         | MI:    | Last Na | ime: |  |  |  | Suffix:  |
| 70) Legal Entity Name (if not an individual):   |            |         |        |         |      |  |  |  |          |
| 71) Attention To:   |            |         |        |         |      |  |  |  |          |
| 72) Real Party in Interest FCC Registration Number (FR  | N):        |         |        |         |      |  |  |  |          |
| 73) Name of Real Party in Interest:   |            |         |        |         |      |  |  |  |          |
| 74) P.O. Box:   | And<br>/Or | 75) Str | eet Ao | ddress: |      |  |  |  |          |
| 76) City: 77) State: 78) Zip Code:  |            |         |        |         |      |  |  |  |          |
| 79) Telephone Number: 80) Fax Number:   |            |         |        |         |      |  |  |  |          |
| 81) E-Mail Address:   |            |         |        |         |      |  |  |  |          |

# 82) Demographics of Assignee/Transferee (Optional):

| Rac | e:   | Ethr | nicity:                 | Gei | nder:   |
|-----|--|------|-------------------------|-----|---------|
| (   | )American Indian or Alaska Native          | (    | )Hispanic or Latino     | (   | )Male   |
| (   | )Asian                                     | (    | )Not Hispanic or Latino | (   | )Female |
| (   | )Black or African-American                 |      |                         |     |         |
| (   | )Native Hawaiian or Other Pacific Islander |      |                         |     |         |
| (   | )White                                     |      |                         |     |         |

# Assignee/Transferee Contact Representative (if other than Assignee/Transferee) (\_\_\_\_\_) Check here if same as Assignee/Transferee.

| 83) First Name:       |            | Ν         | MI:   | Last Na         | ime:       |               | Suffix: |  |
|-----------------------|------------|-----------|-------|-----------------|------------|---------------|---------|--|
| 84) Company Name:     |            |           |       |                 |            |               |         |  |
| 85) Attention To:     |            |           |       |                 |            |               |         |  |
| 86) P.O. Box:         | And<br>/Or | 87) Stree | et Ac | Address:        |            |               |         |  |
| 88) City:             |            |           |       |                 | 89) State: | 90) Zip Code: |         |  |
| 91) Telephone Number: |            |           |       | 92) Fax Number: |            |               |         |  |
| 93) E-Mail Address:   |            |           |       |                 |            |               |         |  |

| Owne | ership Disclosure Information  |                            |
|------|--|----------------------------|
| 94a) | Is the Assignee/Transferee required to file FCC Form 602, Ownership Disclosure Information for the Wireless Telecommunications Services?                             | ( ) <u>Y</u> es <u>N</u> o |
| 94b) | If 94a is 'Y', provide the File Number of the FCC Form 602 that is required to be submitted in conjunction with this application or is already on file with the FCC. | File Number:               |

# Alien Ownership Information (If any answer is 'Y', provide an attachment explaining the circumstances)

| 95) Is the Assignee/Post-transfer Licensee a foreign government or the representative of any foreign government?   | ( | ) <u>Y</u> es <u>N</u> o |
|--|---|--------------------------|
| 96) Is the Assignee/Post-transfer Licensee an alien or the representative of an alien?   | ( | ) <u>Y</u> es <u>N</u> o |
| 97) Is the Assignee/Post-transfer Licensee a corporation organized under the laws of any foreign government?   | ( | ) <u>Y</u> es <u>N</u> o |
| 98) Is the Assignee/Post-transfer Licensee a corporation of which more than one-fifth of the capital stock is<br>owned of record or voted by aliens or their representatives or by a foreign government or representative<br>thereof or by any corporation organized under the laws of a foreign country?  | ( | ) <u>Y</u> es <u>N</u> o |
| 99a) Is the Assignee/Post-transfer Licensee directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country?   | ( | ) <u>Y</u> es <u>N</u> o |
| 99b) If 99a is 'Y', has the Assignee/Post-transfer Licensee received a ruling(s) under Section 310(b)(4) of the Communications Act with respect to the same radio service(s) and geographic coverage area(s) involved in this application?   | ( | ) <u>Y</u> es <u>N</u> o |
| If the answer to 99b is 'Y', include in the exhibit required by Item 99a the citation(s) of the declaratory ruling(s) received by the Assignee/Post-transfer Licensee ( <i>i.e.</i> , DA or FCC Number, FCC Record citation if available, and release date).   |   |                          |
| If 99b is 'N', attach to this filing a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act. It is not necessary to file a request for a foreign ownership ruling if the Applicant includes in the exhibit required by Item 99a a showing that the requested license(s) is exempt from the provisions of Section 310(b)(4). |   |                          |

# Basic Qualification Information

| 100) | Has the Assignee/Transferee or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, or construction permit denied by the Commission?<br>If 'Y', attach an exhibit explaining the circumstances.  | ( ) <u>Y</u> es <u>N</u> o |
|------|---|----------------------------|
| 101) | Has the Assignee/Transferee or any party to this application, or any party directly or indirectly controlling the Assignee/Transferee ever been convicted of a felony by any state or federal court?<br>If 'Y', attach an exhibit explaining the circumstances.   | ( ) <u>Y</u> es <u>N</u> o |
| 102) | Has any court finally adjudged the Assignee/Transferee, or any party directly or indirectly controlling the Assignee/Transferee guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition?<br>If 'Y', attach an exhibit explaining the circumstances. | ( ) <u>Y</u> es <u>N</u> o |

# Assignor/Transferor Certification Statements

-

| 1)  | The Assignor/Transferor certifies either that (1) the authorization will not be assigned or that control of the license(s) will not be transferred until the consent of the Federal Communications Commission has been given, or (2) prior Commission consent is not required because the transaction is subject to streamlined notification procedures for <i>pro forma</i> assignments and transfers by telecommunications carriers. <i>See</i> Section 1.948(c) (1) of the Commission's Rules. |        |  |          |                      |  |  |  |
|---|---|--------|--|----------|----------------------|--|--|--|
| 2)  | The Assignor/Transferor certifies that all statements made in<br>reference are material, are part of this application, and are true   |        |  | documer  | nts incorporated by  |  |  |  |
| 3)  | The Assignor/Transferor certifies that it is not in default c non-tax debt owed to any federal agency.  | on any | payment for Commission licenses and that i | t is not | delinquent on any    |  |  |  |
| Typed or Printed Name of Party Authorized to Sign |   |        |  |          |                      |  |  |  |
| 103)  | First Name:   | MI:    | Last Name:                                 |          | Suffix:              |  |  |  |
|   |   |        |  |          |                      |  |  |  |
| 104)  | Title:  |        |  |          |                      |  |  |  |
| Sigr  | ature:  |        |  | 105) Da  | ate:                 |  |  |  |
|   |   |        |  |          |                      |  |  |  |
| FAI   | FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.  |        |  |          |                      |  |  |  |
|   | LFUL FALSE STATEMENTS MADE ON THIS FORM OR AN   |        |  |          | •                    |  |  |  |
|   | e, Title 18, Section 1001) AND/OR REVOCATION OF ANY S   |        | IN LICENSE OR CONSTRUCTION PERMIT (U       | .S. Code | e, Litle 47, Section |  |  |  |
| 512   | 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).   |        |  |          |                      |  |  |  |

#### Assignee/Transferee Certification Statements

- The Assignee/Transferee certifies either that (1) the authorization(s) will not be assigned or that control of the license(s) will not be transferred until the consent of the Federal Communications Commission has been given, or (2) prior Commission consent is not required because the transaction is subject to streamlined notification procedures for *pro forma* assignments and transfers by telecommunications carriers. See Section 1.948(c)(1) of the Commission's Rules.
- 2) The Assignee/Transferee waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- 3) The Assignee/Transferee certifies that grant of this application would not cause the Assignee or Transferee to be in violation of any pertinent cross-ownership or attribution rules.\*
  \*If the Assignee/Transferee has sought a waiver of any such rule in connection with this application, it may make this certification subject to the

\*If the Assignee/Transferee has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.

- 4) The Assignee/Transferee agrees to assume all obligations and abide by all conditions imposed on the Assignor/Transferor under the subject authorization(s), unless the Federal Communications Commission pursuant to a request made herein otherwise allows, except for liability for any act done by, or any right accrued by, or any suit or proceeding had or commenced against the Assignor/Transferor prior to this assignment/transfer.
- 5) The Assignee/Transferee certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 6) The Assignee/Transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the Commission's Rules for the definition of "party to the application" as used in this certification.
- 7) The Assignee/Transferee certifies that it is not in default on any payment for Commission licenses and that it is not delinquent on any non-tax debt owed to any federal agency.

#### Typed or Printed Name of Party Authorized to Sign

| 106) First Name:  | MI:   | Last Name:                          | Suffix:        |  |  |  |
|---|-------|-------------------------------------|----------------|--|--|--|
|   |       |                                     |                |  |  |  |
| 107) Title:   |       |                                     |                |  |  |  |
|   |       |                                     |                |  |  |  |
| Signature:  |       |                                     | 108) Date:     |  |  |  |
|   |       |                                     |                |  |  |  |
| FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMIS   | SAL O | F THE APPLICATION AND FORFEITURE OF | ANY FEES PAID. |  |  |  |
| WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS 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). |       |                                     |                |  |  |  |
|   |       |                                     |                |  |  |  |

# Authorizations To Be Assigned or Transferred

| 109)<br>Call Sign | 110)<br>Radio Service<br>Code | 111)<br>Location<br>Number | 112)<br>Path<br>Number<br>(Microwave<br>only) | 113)<br>Frequency<br>Number | 114)<br>Lower or Center<br>Frequency (MHz) | 115)<br>Upper<br>Frequency (MHz) | 116)<br>Constructed<br><u>Y</u> es / <u>N</u> o |
|-------------------|-------------------------------|----------------------------|---|-----------------------------|--|----------------------------------|---|
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |
|                   |                               |                            |   |                             |  |                                  |   |

# Schedule for Licensees that Received Bidding Credits or

# Participate in the Installment Payment Plan, or Involving Licenses Won in Closed Bidding

3060 - 0800 See Main Form instructions for public burden estimate

For Purposes of Schedule A, Applicant is defined as the Assignee (Assignment of Authorization) or the post-transaction Licensee (Transfers of Control)

# **Bidding Credits**

| 1 |    |        |       | full amount of bidding credits awarded with regard to each of the subject license(s) been paid as<br>just enrichment payment(s) in previous transaction(s)? | ( ) <u>Y</u> es <u>N</u> o |
|---|----|--------|-------|---|----------------------------|
|   | I  | lf the | e res | ponse to Item 1 is 'Y', Item 2 is not required to be completed.   |                            |
| 2 | 2) | With   | h res | pect to each of the subject licenses, the Applicant:  |                            |
|   |    | (      | )     | a) qualifies for the same designated entity status as the current Licensee  |                            |
|   |    | (      | )     | b) qualifies for a different designated entity status than the current Licensee   |                            |
|   |    | (      | )     | c) does not qualify for any designated entity status  |                            |

# **Installment Payments**

| 3) Have all the installment payment obligations for each of the subject licenses been paid in full?  | ( ) <u>Y</u> es <u>N</u> o |
|--|----------------------------|
| If the response to Item 3 is 'Y', Item 4 is not required to be completed.  |                            |
| <ul> <li>4) With respect to each of the subject licenses, the Applicant:</li> <li>( ) a) qualifies for the same eligibility status for the installment payment plan as the current Licensee</li> <li>( ) b) qualifies for a different eligibility status for the installment payment plan than the current Licensee</li> </ul> |                            |
| <ul> <li>( ) b) qualifies for a different eligibility status for the installment payment plan than the current Licensee</li> <li>( ) c) does not qualify for the installment payment plan</li> </ul>   |                            |
|  |                            |

# Closed Bidding Licenses

| 5) | Have cor<br>subject li | istruction notifications been submitted as required by the Commission's Rules for each of the censes? | ( ) <u>Y</u> es <u>N</u> o |
|----|------------------------|---|----------------------------|
|    | If the res             | conse to Item 5 is 'Y', Item 6 is not required to be completed.                                       |                            |
| 6) | With res               | a) qualifies for closed bidding   |                            |
|    | ( )                    | b) does not qualify for closed bidding  |                            |

# Purpose ((Check Modify if filing an Amendment application and changing the Revenue and Asset Information from what was provided on the original filing)

□ Modify

| Gross Revenue Disclosure<br>Most Recent Reportable Y   |   |   | r                                       |
|--|---|---|---|
| 8a) Were the Applicant and any pre<br>If 'N', explain why in an attachn  |   | existence for a full year of the relevant period?             | ( ) <u>Y</u> es <u>N</u> o              |
| If 'Y', provide the following infor  | mation.   |   |   |
| 8b) Gross Revenues   | \$  | (Format: 99,999.99)   |   |
| 8c) Year End Date:   |   | (Date Format: MM/DD/YYYY)                                     |   |
| One Year Prior to Most Re  | cent Reportable Ye  | ar  |   |
| 9a) Were the Applicant and any pre<br>If 'N', explain why in an attachr<br>If 'Y', provide the following infor | ment.   | existence for a full year of the relevant period?             | ( ) <u>Y</u> es <u>N</u> o              |
| 9b) Gross Revenues   |   | (Format: 99,999.99)   |   |
| 9c) Year End Date:   |   | (Date Format: MM/DD/YYYY)                                     |   |
| Two Years Prior to Most R<br>10a) Were the Applicant and any p<br>If 'N', explain why in an attact             | redecessors-in-interest in                                  | <b>existence for a full year of the relevant period?</b>      | ( ) <u>Y</u> es <u>N</u> o              |
| If 'Y', provide the following infor  |   |   |   |
| 10b) Gross Revenues  | \$  | (Format: 99,999.99)   |   |
| 10c) Year End Date:  |   | (Date Format: MM/DD/YYYY)                                     |   |
| Average Gross Revenue  |   |   |   |
| 11) Average Gross Revenue of Re  | ported Years: \$  | (Format: 99,999.99)   |   |
| Asset Disclosure   |   |   |   |
| 12) Total Assets as of Application I   | -iling Date: \$   | (Format: 99,999.99)   |   |
| Financial Statements   |   |   |   |
| 13) Audited or Unaudited (Check  | One)  |   |   |
| ☐ The Applicant used audite  | d financial statements.                                     |   |   |
|  | idited financial statements<br>ancial officer or the equiva | prepared in accordance with Generally Accepted Acco<br>alent. | ounting Principles (GAAP) and certified |

|  | Add |
|--|-----|
|--|-----|

Modify

Delete

#### **15)** Disclosable Interest Holder

| Entity Name:           |    |      |        | FCC Registration Number (FRN): |
|------------------------|----|------|--------|--------------------------------|
| Individual Name: First | МІ | Last | Suffix | FCC Registration Number (FRN): |

#### **Gross Revenue Disclosure** Most Recent Reportable Year

| 16a) Were the DIH and any predecessors<br>If 'N', explain why in an attachment. | s-in-interest in e | xistence for a full year of the relevant period? | ( ) <u>Y</u> es <u>N</u> o |
|---|--------------------|--|----------------------------|
| If 'Y', provide the following information                                       | ۱.                 |  |                            |
| 16b) Gross Revenues   | \$                 | (Format: 99,999.99)                              |                            |
| 16c) Year End Date:   |                    | (Date Format: MM/DD/YYYY)                        |                            |

#### **One Year Prior to Most Recent Reportable Year**

| 17a) Were the DIH and any predece<br>If 'N', explain why in an attachr |        | ence for a full year of the relevant period? | ( ) <u>Y</u> es <u>N</u> o |
|--|--------|--|----------------------------|
| If 'Y', provide the following inform                                   | ation. |  |                            |
| 17b) Gross Revenues  | \$     | (Format: 99,999.99)                          |                            |
| 17c) Year End Date:  |        | (Date Format: MM/DD/YYYY)                    |                            |

#### Two Years Prior to Most Recent Reportable Year

| 18a) Were the DIH and any predece<br>If 'N', explain why in an attach |         | stence for a full year of the relevant period? | ( ) <u>Y</u> es <u>N</u> o |
|---|---------|--|----------------------------|
| If 'Y', provide the following inform                                  | nation. |  |                            |
| 18b) Gross Revenues   | \$      | (Format: 99,999.99)                            |                            |
| 18c) Year End Date:   |         | (Date Format: MM/DD/YYYY)                      |                            |

### Average Gross Revenue

19) Average Gross Revenue of Reported Years: \$\_\_\_\_\_\_(Format: 99,999.99)

#### Asset Disclosure

20) Total Assets as of Application Filing Date: \$\_\_\_\_\_\_(Format: 99,999.99)

#### **Financial Statements**

21) Audited or Unaudited (Check One)

The DIH used audited financial statements.

The DIH used unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by the DIH's chief financial officer or the equivalent.

FCC Form 603 – Schedule A

| 🗆 Add  |              | Modify  |             | Delete                               |
|--|--------------|---|-------------|--------------------------------------|
| 23) Affiliate  |              |   |             |                                      |
| Entity Name:   |              |   |             | FCC Registration Number (FRN):       |
| Individual Name: First   | мі           | Last  | Suffix      | FCC Registration Number (FRN):       |
| <b>Gross Revenue Disclosure</b><br>Most Recent Reportable Year                           |              |   |             |                                      |
| 24a) Were the Affiliate and any predecessors-ir<br>If 'N', explain why in an attachment. | n-interest i | n existence for a full year of the relevant period? |             | ( ) <u>Y</u> es <u>N</u> o           |
| If 'Y', provide the following information.   |              |   | ·           |                                      |
| 24b) Gross Revenues \$   | 5            | (Format: 99,999.99)                                 |             |                                      |
| 24c) Year End Date:  |              | (Date Format: MM/DD/YYYY)                           |             |                                      |
| One Year Prior to Most Recent Repo   | ortable      | Year  |             |                                      |
| 25a) Were the Affiliate and any predecessors-ir<br>If 'N', explain why in an attachment. | n-interest i | n existence for a full year of the relevant period? |             | ( ) <u>Y</u> es <u>N</u> o           |
| If 'Y', provide the following information.   |              |   |             |                                      |
| 25b) Gross Revenues \$   | 5            | (Format: 99,999.99)                                 |             |                                      |
| 25c) Year End Date:  |              | (Date Format: MM/DD/YYYY)                           |             |                                      |
| Two Years Prior to Most Recent Re  | oortable     | e Year  |             |                                      |
|  |              | n existence for a full year of the relevant period? |             | ( ) <u>Y</u> es <u>N</u> o           |
| If 'Y', provide the following information.   |              |   |             |                                      |
| 26b) Gross Revenues \$   | 5            | (Format: 99,999.99)                                 |             |                                      |
| 26c) Year End Date:  |              | (Date Format: MM/DD/YYYY)                           |             |                                      |
| Average Gross Revenue  |              |   |             |                                      |
| 27) Average Gross Revenue of Reported Years  | s: \$        | (Format: 99,999.                                    | .99)        |                                      |
| Asset Disclosure   |              |   |             |                                      |
| 28) Total Assets as of Application Filing Date:  | \$           | (Format: 99,999.99                                  | )           |                                      |
| Financial Statements   |              |   |             |                                      |
| 29) Audited or Unaudited (Check One)   |              |   |             |                                      |
| The Affiliate used audited financial stat  | tements.     |   |             |                                      |
| The Affiliate used unaudited financial by the Affiliate's chief financial officer of     |              | ts prepared in accordance with Generally Acce       | pted Accoun | ting Principles (GAAP) and certified |

FCC Form 603 – Schedule A

Edition Date - Page 4

#### Purpose (Select One)

| Add Delete |     | _      |        |
|------------|-----|--------|--------|
|            | Add | Modify | Doloto |
|            |     |        |        |

#### 31) Entity With Whom the Applicant Has an Attributable Material Relationship

| Entity Name:           |    |      |                     | FCC Registration Number (FRN): |
|------------------------|----|------|---------------------|--------------------------------|
| Individual Name: First | MI | Last | <mark>Suffix</mark> | FCC Registration Number (FRN): |

#### Gross Revenue Disclosure Most Recent Reportable Year

| 32a) Were the AMR Entity and any<br>If 'N', explain why in an attach |         | in existence for a full year of the relevant period? | ( ) <u>Y</u> es <u>N</u> o |
|--|---------|--|----------------------------|
| If 'Y', provide the following inform                                 | mation. |  |                            |
| 32b) Gross Revenues  | \$      | (Format: 99,999.99)                                  |                            |
| 32c) Year End Date:  |         | (Date Format: MM/DD/YYYY)                            |                            |

#### One Year Prior to Most Recent Reportable Year

| 33a) Were the AMR Entity and any prec<br>If 'N', explain why in an attachmen<br>If 'Y', provide the following informati | <u>t.</u> | est in existence for a full year of the relevant period? | ( ) <u>Y</u> es <u>N</u> o |
|---|-----------|--|----------------------------|
| 33b) Gross Revenues   | \$        | (Format: 99,999.99)                                      |                            |
| 33c) Year End Date:   |           | (Date Format: MM/DD/YYYY)                                |                            |

### Two Years Prior to Most Recent Reportable Year

| 4a) Were the AMR Entity and any<br>If 'N', explain why in an attach |         | in existence for a full year of the relevant period? () <u>Y</u> es <u>N</u> o |
|---|---------|--|
| If 'Y', provide the following infor                                 | mation. | I  |
| 34b) Gross Revenues   | \$      | (Format: 99,999.99)  |
| 34c) Year End Date:   | <u></u> | (Date Format: MM/DD/YYYY)  |

#### Average Gross Revenue

35) Average Gross Revenue of Reported Years: \$\_\_\_\_\_\_ (Format: 99,999.99)

#### Asset Disclosure

36) Total Assets as of Application Filing Date: \$\_\_\_\_\_\_ (Format: 99,999.99)

# **Financial Statements**

| 37) Audited or Unaudited (Check One)  |
|---|
| The AMR Entity used audited financial statements.   |
| The AMR Entity used unaudited financial statements prepared in accordance with Generally Accepted Accounting Principles (GAAP) and certified by the AMR Entity's chief financial officer or the equivalent. |
| FCC Form 603 – Schedule   |

| Closed Bidding/Designa<br>Total Gross Revenues for | ited Entity Eligibili<br>or Most Recent Re | ity<br>portable Year              |  |
|--|--|-----------------------------------|--|
| 38a) Gross Revenues                                | \$   | (Format: 99,999.99)               |  |
| 38b) Year End Date:                                |  | (Date Format: MM/DD/YYYY)         |  |
| Total Gross Revenues fo                            | or One Year Prior t                        | to Most Recent Reportable Year    |  |
| 39a) Gross Revenues:                               | \$   | (Format: 99,999.99)               |  |
| 39b) Year End Date:                                |  | (Date Format: MM/DD/YYYY)         |  |
| Total Gross Revenues for                           | or Two Years Prio                          | or to Most Recent Reportable Year |  |
| 40a) Gross Revenues:                               | \$   | (Format: 99,999.99)               |  |
| 40b) Year End Date:                                |  | (Date Format: MM/DD/YYYY)         |  |
| Total Aggregate Average                            | e Gross Revenues                           | for Designated Entity             |  |
| 41) Aggregate Average Gross F                      | Revenue: \$                                | (Format: 99,999.99)               |  |
| Total Aggregate Average                            | e Gross Revenues                           | for Closed Bidding                |  |
| 42) Aggregate Average Gross F                      | Revenue: \$                                | (Format: 99999.99)                |  |
| Total Assets Disclosure                            | for Closed Biddin                          | g                                 |  |
| 43) Total Assets: \$                               |  | (Format: 99,999.99)               |  |

#### For Applicants Claiming Eligibility as an Entrepreneur Under the General Rule

Applicant certifies that it is eligible to obtain the licenses for which it applies.

#### For Applicants Claiming Eligibility as a Publicly Traded Corporation

Applicant certifies that it is eligible to obtain the licenses for which it applies and that it complies with the definition of a Publicly Traded Corporation, as set out in the applicable FCC rules.

# For Applicants Claiming Eligibility as a Very Small Business, Very Small Business Consortium, Small Business, or Small Business Consortium

Applicant certifies that it is eligible for the bidding credit it seeks in connection with the licenses for which it is applying.

#### For Applicants Claiming Eligibility as a Rural Telephone Company

Applicant certifies that it meets the definition of a Rural Telephone Company as set out in the applicable FCC rules, and must disclose all parties to agreement(s) to partition licenses won in this auction. See applicable FCC rules.

#### For Applicants Claiming Tribal Lands Bidding Credit

Applicant certifies that it will comply with the bidding credit buildout requirements and consult with the tribal government(s) regarding the siting of facilities and deployment of service on the tribal land(s) as set out in the applicable FCC rules.

#### For Auction Applicants

Applicant provided separate gross revenue information for itself, for each of Applicant's officers and directors; for each of Applicant's other controlling interests; for each of Applicant's affiliates; and for each affiliate of each of Applicant's officers, directors, and other controlling interests. Applicant provided separate gross revenue and total asset information for itself, for each of Applicant's officers and directors; for each of Applicant's other controlling interests.

1) Partitioner/Disaggregator Call Sign:

#### **Partitioned Area**

| 2)                 | 3)                                      | 4)               |  |
|--------------------|---|------------------|--|
| Defined Area To Be | <b>Undefined Area To Be Partitioned</b> | Population of    |  |
| Partitioned        | (Complete Schedule C)                   | Partitioned Area |  |
|                    | Schedule C # Attached:                  |                  |  |

#### 5) Disaggregated Spectrum (in MHz)

| Disaggregat                     | ted Spectrum | Disaggregat                     | ed Spectrum | Disaggregated Spectrum          |  |  |
|---------------------------------|--------------|---------------------------------|-------------|---------------------------------|--|--|
| Lower Frequency Upper Frequency |              | Lower Frequency Upper Frequency |             | Lower Frequency Upper Frequency |  |  |
|                                 |              |                                 |             |                                 |  |  |
|                                 |              |                                 |             |                                 |  |  |
|                                 |              |                                 |             |                                 |  |  |
|                                 |              |                                 |             |                                 |  |  |
|                                 |              |                                 |             |                                 |  |  |
|                                 |              |                                 |             |                                 |  |  |

#### 6) Coverage Requirements - Partitioning

| ( | ) | Option 1 | Partitioner and Partitionee will independently meet all construction requirements for their licensed areas.        |
|---|---|----------|--|
| ( | ) | Option 2 | Partitioner will meet all construction requirements for the entire licensed area.                                  |
| ( | ) | Option 3 | Partitioner and Partitionee will share all construction requirements for the entire pre-partitioned licensed area. |

**Note:** Option 3 only applies to 700 MHz licensees in the following channel blocks: Block A in the 698-704 MHz and 728-734 MHz bands, Block B in the 704-710 MHz and 734-740 MHz bands, Block C, C1 and C2 in the 746-757 MHz and 776-787 MHz, and Block E in the 722-728 MHz band.

# 7) Coverage Requirements - Disaggregation

| ( | ( ) Option 1 Disaggregator will meet all construction requirements for the entire licensed area. |          |   |  |  |  |
|---|--|----------|---|--|--|--|
| ( | )  | Option 2 | Disaggregatee will meet all construction requirements for the entire licensed area.   |  |  |  |
| ( | )  | Option 3 | Disaggregator and Disaggregatee will share responsibility for meeting all construction requirements for the entire licensed area. |  |  |  |

For each undefined geographic area, complete up to 300 Latitude/Longitude combinations for every 3 degrees azimuth, using NAD83 Datum. Attach additional Schedule C's if necessary.

| Ising NAD83 Datum. Attach<br>Latitude (DD-MM-SS.S-D)<br>D) | Longitude (DDD-MM-SS.S- | Latitude (DD-MM-SS.S-D)<br>SS.S-D) | Longitude (DDD-MM- |
|--|-------------------------|------------------------------------|--------------------|
| 1.   |                         | 31.                                |                    |
| 2.   |                         | 32.                                |                    |
| 3.   |                         | 33.                                |                    |
| 4.   |                         | 34.                                |                    |
| 5.   |                         | 35.                                |                    |
| 6.   |                         | 36.                                |                    |
| 7.   |                         | 37.                                |                    |
| 8.   |                         | 38.                                |                    |
| 9.   |                         | 39.                                |                    |
| 10.  |                         | 40.                                |                    |
| 11.  |                         | 41.                                |                    |
| 12.  |                         | 42.                                |                    |
| 13.  |                         | 43.                                |                    |
| 14.  |                         | 44.                                |                    |
| 15.  |                         | 45.                                |                    |
| 16.  |                         | 46.                                |                    |
| 17.  |                         | 47.                                |                    |
| 18.  |                         | 48.                                |                    |
| 19.  |                         | 49.                                |                    |
| 20.  |                         | 50.                                |                    |
| 21.  |                         | 51.                                |                    |
| 22.  |                         | 52.                                |                    |
| 23.  |                         | 53.                                |                    |
| 24.  |                         | 54.                                |                    |
| 25.  |                         | 55.                                |                    |
| 26.  |                         | 56.                                |                    |
| 27.  |                         | 57.                                |                    |
| 28.  |                         | 58.                                |                    |
| 29.  |                         | 59.                                |                    |
| 30.  |                         | 60.                                |                    |

| Latitude (DD-MM-SS.S-D)<br>D) |  | Longitude (DDD-MM-SS.S- |      | ude (DD-MM-SS.S-D)<br>-D) | Longitude (DDD-MM- |
|-------------------------------|--|-------------------------|------|---------------------------|--------------------|
| 61.                           |  |                         | 91.  | _                         |                    |
| 62.                           |  |                         | 92.  |                           |                    |
| 63.                           |  |                         | 93.  |                           |                    |
| 64.                           |  |                         | 94.  |                           |                    |
| 65.                           |  |                         | 95.  |                           |                    |
| 66.                           |  |                         | 96.  |                           |                    |
| 67.                           |  |                         | 97.  |                           |                    |
| 68.                           |  |                         | 98.  |                           |                    |
| 69.                           |  |                         | 99.  |                           |                    |
| 70.                           |  |                         | 100. |                           |                    |
| 71.                           |  |                         | 101. |                           |                    |
| 72.                           |  |                         | 102. |                           |                    |
| 73.                           |  |                         | 103. |                           |                    |
| 74.                           |  |                         | 104. |                           |                    |
| 75.                           |  |                         | 105. |                           |                    |
| 76.                           |  |                         | 106. |                           |                    |
| 77.                           |  |                         | 107. |                           |                    |
| 78.                           |  |                         | 108. |                           |                    |
| 79.                           |  |                         | 109. |                           |                    |
| 80.                           |  |                         | 110. |                           |                    |
| 81.                           |  |                         | 111. |                           |                    |
| 82.                           |  |                         | 112. |                           |                    |
| 83.                           |  |                         | 113. |                           |                    |
| 84.                           |  |                         | 114. |                           |                    |
| 85.                           |  |                         | 115. |                           |                    |
| 86.                           |  |                         | 116. |                           |                    |
| 87.                           |  |                         | 117. |                           |                    |
| 88.                           |  |                         | 118. |                           |                    |
| 89.                           |  |                         | 119. |                           |                    |
| 90.                           |  |                         | 120. |                           |                    |

FCC Form 603 OMB Schedule D 0800

# Schedule for Notification of Consummation of an

# Assignment of Authorization or a Transfer of Control

Approved by

3060 -

See Main Form instructions for public burden estimate

| 1) Provide the File Number of the Assignment of Authorization or Transfer of Control application.      | File Number:   |
|--|----------------|
| 2) Provide the actual date of consummation for the Assignment of Authorization or Transfer of Control. | (MM/DD/YYYY)// |

FCC Form 603 – Schedule D Edition Date - Page 1 FCC Form 603 Schedule E

# Schedule for Request for Extension of Time To Consummate an Assignment of Authorization or a Transfer of Control

Approved by OMB 3060 - 0800 See Main Form instructions for public burden estimate

| 1) Provide the File Number of the Assignment of Authorization or Transfer of Control application. | File Number:   |
|---|----------------|
| 2) Provide the consummation date for the Assignment of Authorization or Transfer of Control.      | (MM/DD/YYYY)// |