

FOR  
FCC  
USE  
ONLY

**FCC 338  
AM STATION  
MODULATION DEPENDENT CARRIER LEVEL (MDCL)  
NOTIFICATION**

FOR COMMISSION USE ONLY  
FILE NO.

**SECTION I - GENERAL INFORMATION**

1. Legal Name of the Applicant WXXI PUBLIC BROADCASTING COUNCIL		
Mailing Address PO BOX 30021		
City ROCHESTER	State or Country (if foreign address) NEW YORK	ZIP Code 14603
Telephone Number (include area code) 585-325-7500	E-Mail Address KHATFIELD@WXXI.ORG	
FCC Registration Number 0003410362	Call Sign WXXI	Facility ID Number 74220

2. Contact Representative (if other than licensee/permittee) MALCOLM G. STEVENSON		Firm or Company Name SCHWARTZ, WOODS & MILLER
Mailing Address 2001 L STREET, NW		
City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20036-4940
Telephone Number (include area code) 202-833-1700	E-Mail Address STEVENSON@SWMLAW.COM	

3. Community of License: City: ROCHESTER State: NY

4. Date MDCL Control Operation commenced: 06/13/2016 (mm/dd/yyyy)

5. In the event of interference, questions should be directed to licensee's technical representative:

Name KENT HATFIELD	Telephone Number (include area code, omit dashes) 585-258-0223
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6. Technical Data:

Transmitter Manufacturer: NAUTEL

Transmitter Model: XR6

MDCL Control Technology Used: ACC  AMC  DAM

DCC  Other (Specify): \_\_\_\_\_

7. Anti-Drug Abuse Act Certification. Licensee certifies that neither licensee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.  Yes  No

8. Licensee certifies that its MDCL operation will not cause human exposure to radio frequency radiation in excess of the limits for maximum permissible exposure specified in Section 1.1310 of the Commission's rules, and it is therefore categorically excluded from environmental processing pursuant to Section 1.1306(b) of the Commission's rules.

Yes  No

If No, licensee must submit an environmental assessment (EA) and may not commence MDCL operation until the EA is acted upon by the Commission.

Exhibit No.

**CERTIFICATION**

I hereby certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

Typed or Printed Name of Person Signing Kent Stephen Hatfield	Typed or Printed Title of Person Signing VICE PRESIDENT TECHNOLOGY & OPERATIONS
Signature 	6/12/16

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