

Federal Communications Commission Washington, D.C. 20554		Approved by OMB 3060-1115 (February 2009)		FOR FCC USE ONLY	
FCC 388				FOR COMMISSION USE ONLY	
DTV Quarterly Activity Station Report				FILE NO. -20090409ACF	
Licensee SCRIPPS HOWARD BROADCASTING COMPANY					
Call Sign KSHB-TV		Facility Id 59444		Previous Call Sign (if applicable)	
Community of License					
City	State	County	Zip Code		
KANSAS CITY	MO	JACKSON	64112 - 2236		
Nielsen DMA KANSAS CITY		World Wide Web Home Page Address WWW.KSHB.COM		Licensee Renewal Expiration Date (mm/dd/yyyy) 02/01/2006	
Channel Numbers: (Check the Channel Number(s) to which this form applies.)					
<input checked="" type="checkbox"/> Analog	41				
<input checked="" type="checkbox"/> Digital	42				
Report reflects information for quarter ending: 03/31/2009					
Have you opted to comply with Option One, Two, or Three (once elected, this choice may not change)?					
<input type="radio"/> Option One (A and D) <input checked="" type="radio"/> Option Two (B and D) <input type="radio"/> Option Three (C and D)					
Over the past quarter, have you fully complied with the requirements of this option?				<input checked="" type="radio"/> Yes <input type="radio"/> No	
Simulcasting:					
Are you simulcasting on your Analog channel and your primary Digital stream?				<input checked="" type="radio"/> Yes <input type="radio"/> No	
Application Purpose:					
<input checked="" type="radio"/> DTV Education Report					
<input type="radio"/> Amendment		File Number -			
If an amendment, include a comment explaining the reason and the portions of the pending application that are being revised.					

Section B (For broadcasters electing Option Two)

On its analog channel, and its primary digital stream, a station must run an average of 16 transition-related PSAs and 16 transition-related crawls, snipes, and/or tickers per week in each quarter, all between the hours of 5 a.m. and 1 a.m. It must also run one 30 minute DTV-related informational program once, and one 100-Day Countdown piece per day for the 100 days prior to the conclusion of the transition. Comment boxes MUST be used to describe these compliant activities (See rules for additional details).

Total Number of Eligible DTV Transition-Related PSAs and Crawls, Snipes, and/or Tickers (CSTs) Run -- Last Quarter

How many DTV PSAs and CSTs did your station run between 5:00 a.m. and 1:00 a.m. last quarter?	
Total 5:00 a.m. to 1:00 a.m. PSAs	264
Total 5:00 a.m. to 1:00 a.m. CSTs	169
For informational purposes only, how many DTV PSAs and CSTs did your station run in the last quarter from 6:00 a.m. to 9:00 a.m.?	
Total 6:00 a.m. to 9:00 a.m. PSAs	14
Total 6:00 a.m. to 9:00 a.m. CSTs	39

For stations located in the Eastern or Pacific Time Zone, how many DTV PSAs and CSTs did your station run in the last quarter from 6:00 p.m. to 11:35 p.m. (must average at least 4 per week)?

Total 6:00 p.m. to 11:35 p.m. PSAs	
Total 6:00 p.m. to 11:35 p.m. CSTs	

For stations located in the Central or Mountain Time Zone, how many DTV PSAs and CSTs did your station run in the last quarter from 5:00 p.m. to 10:35 p.m. (must average at least 4 per week)?

Total 5:00 p.m. to 10:35 p.m. PSAs	92
Total 5:00 p.m. to 10:35 p.m. CSTs	85

Comments:
ADDITIONALLY KSHB-TV AIRED 244 DTV SPOTS BETWEEN THE HOURS OF 1:01AM AND 4:59AM.

30 Minute Educational Programs - Last Quarter

How many 30 minute, DTV-related informational programs did your station run during the quarter? At least one such program must be run between the hours of 8:00 a.m. and 11:35 p.m., prior to June 12, 2009.

Total number of 30 Minute Informational Programs	0
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Comments:

100-Day Countdown - Last Quarter

All stations participating in Option Two must air a minimum of one "Countdown To DTV" per day during certain periods. Due to the delay in the DTV deadline, the revision of the countdown rules, and differing analog termination dates, not every station was required to air the "Countdown To DTV" the same number of times during the first quarter of 2009. Below, list the actual number of days on which your station aired any eligible "Countdown to DTV," and, in the Comments field, briefly explain how this number of days was calculated.

0	Graphic Displays
0	Animated Graphics
86	Graphic and Audio Displays
0	Longer Form Reminders

Comments:
KSHB AIRED 2 PER DAY FROM JANUARY 1ST THRU FEBRUARY 12TH.

Section D (For all broadcasters)

Additional DTV On-air Initiatives - Last Quarter	
Did your station run additional on-air initiatives (such as news reports, town hall meetings, etc.) during the quarter? The comment box may be used to describe these initiatives.	<input checked="" type="radio"/> Yes <input type="radio"/> No

Comments:
JANUARY 1ST THRU FEBRUARY 22ND AN AVERAGE OF 5 NEWSCASTS PER WEEK CONTAINED DTV EDUCATIONAL INFORMATION. FEBRUARY 23RD THRU MARCH 31ST HAD AN AVERAGE OF 1 STORY PER WEEK ON DTV EDUCATION IN PRIME TIME NEWSCASTS.

Station Website Additional Activity Related to the DTV Transition - Last Quarter	
Does your station have a Website?	<input checked="" type="radio"/> Yes <input type="radio"/> No
If YES, did your station provide additional DTV related information or activities on that Website? The comment box may be used to describe what was posted on the station's Website.	<input checked="" type="radio"/> Yes <input type="radio"/> No

Comments:
THERE IS A LINK ON THE HOME PAGE THAT OPENS A SITE WITH INFORMATION ON THE SWITCH, HOW TO SET UP EQUIPMENT, HOW TO ACCESS HDTV, AND ANSWERS TO FREQUENTLY ASKED QUESTIONS.

Additional DTV Outreach Efforts – Last Quarter	
Check all of the DTV related activities listed below that your station engaged in over the last quarter. The comment box may be used to describe this activity.	
<input type="checkbox"/> Speaking Engagements	Comments:
<input type="checkbox"/> Community Events	Comments:
<input type="checkbox"/> Other (describe)	Comments:
This comment box may be used to include other comments or information about your station's DTV activity over the last quarter.	
Comments: ON JANUARY 12 DURING OUR 11:00AM NEWSCAST AND OUR 10:00PM NEWSCAST WE DID A DTV TEST.	

Station Certification	
I certify that the statements in this document are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.	
Typed or Printed Name of Person Signing	Typed or Printed Title of Person Signing VICE PRESIDENT & GENERAL MANAGER
Signature CRAIG ALLISON	Date (mm/dd/yyyy) 04/09/2009

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

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We have estimated that each response to this collection of information will take 3 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, Paperwork Reduction Project (3060-1115), Washington, D.C. 20554. We will also accept your comments via the Internet if you send them to pra@fcc.gov. Remember - 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 or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1115.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.