## **Federal Communications Commission**

FCC MB - CDBS Electronic Filing Account number: 878963

Description: KOLN 1ST QUARTER 2009 FORM 388 Application Reference Number: 20090406ALG Successfully filed at Apr 6 2009 6:00PM

Based on the information supplied, no fee is required.

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| Federal Communications Commission Approved by OMI Washington, D.C. 20554 3060-1115 (February 2009)   |           | 3060-1115 (February 2009)   |            | USE ONLY                           |
|--|-----------|---|------------|------------------------------------|
| FCC 388 DTV Quarterly Activity Station Report  |           |   |            | imission use only<br>-20090406ALG  |
| Licensee<br>GRAY TELEVISION LICENSEE, LLC  |           |   |            |                                    |
| Call Sign<br>KOLN  |           | Facility Id<br>7890   |            | Previous Call Sign (if applicable) |
| Community of License   |           |   |            |                                    |
| City   | State     | County  | Zip Co     |                                    |
| LINCOLN  | NE        | LANCASTER   | 68503      | - 2801                             |
| Nielsen DMA<br>LINCOLN & HASTINGS-KRNY   |           | World Wide Web Home Page Address HTTP://WWW.KOLNKGIN.COM    Licensee Renewal Expiration   (mm/dd/yyyy)   06/01/2006 |            | 1 (A)                              |
| Channel Numbers: (Check the  | Channel N | umber(s) to which this form app   | lies.)     |                                    |
| Iv Analog         10           Iv Digital         25   |           |   |            |                                    |
| 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)?  |           |   |            |                                    |
| Option One (A and D) Option Two (B and D) Option Three (C and D)  Over the past quarter, have you fully complied with the requirements of this option?  Yes No |           |   | r?         |                                    |
| Simulcasting:  |           |   |            |                                    |
| Are you simulcasting on your Analog channel and your primary Digital stream?  • Yes No   |           |   | • Yes C No |                                    |
| Application Purpose:   |           |   |            |                                    |
| TV Education Report  |           |   |            |                                    |
| C Amendment  |           |   | F          | Pile 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

| Total 5:00 a.m. to 1:00 a.m. | 575 |  |
|------------------------------|-----|--|
| PSAs                         |     |  |
| Total 5:00 a.m. to 1:00 a.m. | 378 |  |
| CSTs                         |     |  |

| 9:00 a.m.?<br>Total 6:00 a.m. to 9:00 a.m.                                  | 90  |
|---|---|
| PSAs  |   |
| Total 6:00 a.m. to 9:00 a.m. CSTs   | 43  |
| For stations located in the East  | ern or Pacific Time Zone, how many DTV PSAs and CSTs did your station run in the last 5 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 Cen   | tral or Mountain Time Zone, how many DTV PSAs and CSTs did your station run in the last 5 p.m.(must average at least 4 per week)? |
|   |   |
| Total 5:00 p.m. to 10:35 p.m.   |   |
| Total 5:00 p.m. to 10:35 p.m.<br>PSAs                                       | <u> </u>  |
| Total 5:00 p.m. to 10:35 p.m.<br>PSAs Total 5:00 p.m. to 10:35 p.m.<br>CSTs | G .   |

### 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

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          |  |
| 50 | Graphic and Audio Displays |  |
| 0  | Longer Form Reminders      |  |

Comments:

THE GRAPHIC & AUDIO DISPLAYS WERE CREATED AS A SPOT WHICH WAS CONTRACTED AND TRACKABLE BY USING OUR TRAFFIC PROGRAM. THEY AIRED 126 TIMES DURING THIS QUARTER. (EVERY DAY 1/1/09-2/17/09, PLUS 3/4/09-3/5/09)

#### Section D (For all broadcasters)

| LANCE ADENION Sin Indicatives Last Overton       |  |
|--|--|
| Additional DTV On-air Initiatives - Last Quarter |  |
|  |  |
| 1  |  |

| 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.   | € Yes C No                                  |  |  |
|--|---|--|--|
| Comments: BEGINNING TWO WEEKS BEFORE THE DIGITAL SWITCH, NEWS STORIES RELATED TO TRANSITION AIRED EVERY DAY. THE STORIES EDUCATED VIEWERS ON TOPICS RAN HOOKING UP A CONVERTER BOX, TO RESCANNING YOUR TV, TO SELECTING AN AN STORY INCLUDED RESOURCES FOR MORE INFORMATION (HOTLINES, WEBSITES). MEDIC SERVICE ANNOUNCEMENTS WERE PRODUCED AND AIRED, DETAILING HOW WOULD AFFECT THE STATION'S COVERAGE AREA, THE NEED TO RESCAN, AND CONTROL TRANSITION DATE.  | TENNA. EVERY ANY DIFFERENT V THE TRANSITION |  |  |
| Station Website Additional Activity Related to the DTV Transition - Last Quarter   |   |  |  |
| Does your station have a Website?  | € Yes C 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.   | e <sub>Yes</sub> c <sub>No</sub>            |  |  |
| Comments: A SPECIAL DTV PAGE EXPLAINED THE TRANSITION, CONTAINED A COUNTDOWN TO OUR TRANSITION DATE, FAQ, LINKS TO THE CONVERTER BOX PROGRAM, ANTENNA HELP, AND MORE. AS THE TRANSITION APPROACHED, DTV "HOTLINE" NUMBERS, INCLUDING THE FCC, THE STATION'S DTV PHONE BANK, THE NEBRASKA HUMAN SERVICES HOTLINE, AND NEBRASKA EDUCATIONAL TELECOMMUNICATIONS WERE POSTED PROMINENTLY FOR USERS SEEKING DTV TECHNICAL SUPPORT. MAPS DETAILING OUR COVERAGE BEFORE AND AFTER THE SWITCH WERE ALSO POSTED. A CRAWL AT THE TOP OF OUR WEBSITE NOTIFIED USERS OF THE SWITCH. IN ADDITION, ALL DTV-RELATED NEWS STORIES WERE AVAILABLE TO WATCH ONLINE AT OUR DTV PAGE.  |   |  |  |
| 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.  |   |  |  |
| Speaking Engagements   |   |  |  |
| Comments:  |   |  |  |
| Community Events   |   |  |  |
| Comments:  |   |  |  |
| Other (describe)   |   |  |  |
| Comments: EMPLOYEES WERE AVAILABLE VIA PHONE BANK TO PROVIDE DTV TECHNICAL SUPPORT DURING THE SWITCH, AND DURING THE DAYS FOLLOWING THE SWITCH. PHONE BANK OPERATORS WERE ABLE TO ANSWER QUESTIONS AND SOLVE MOST PROBLEMS BY TALKING CALLERS THROUGH BOX INSTALLATION OR A RESCAN. THE STATION PARTNERED WITH TWO ELECTRONICS STORES, SCHAEFER'S AND ERNIE'S, TO PROVIDE WALK-IN CENTERS FOR VIEWERS WHO NEEDED HELP. FLYERS WITH BEFORE/AFTER COVERAGE MAPS, TROUBLESHOOTING TIPS, PHONE NUMBERS, AND DTV WEBSITES WERE AVAILABLE AT THE CENTERS. THE WALK-IN CENTERS WERE ALSO PROMOTED ON AIR, THROUGH LIVE BROADCASTS ON SITE. ON FEB. 17TH, STATION GENERAL MANAGER JASON EFFINGER PARTICIPATED IN A DTV CALL-IN SEGMENT DURING A LOCAL MORNING RADIO PROGRAM. |   |  |  |
| This comment box may be used to include other comments or information about your station the last quarter.   | n's DTV activity over                       |  |  |
| Comments:  |   |  |  |

| Station Certification I certify that the statements in this document are true made in good faith. | e, complete, and correct to the best of my knowledge and belief, and are |
|---|--|
| Typed or Printed Name of Person Signing   | Typed or Printed Title of Person Signing NIKKI BATES                     |
| Signature<br>NIKKI BATES  | Date (mm/dd/yyyy)<br>04/06/2009  |

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).

## FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

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.

Menu

# **Federal Communications Commission**

FCC MB - CDBS Electronic Filing Account number: 878963

Description: KGIN 1ST QUARTER 2009 FORM 388 Application Reference Number: 20090406ALH Successfully filed at Apr 6 2009 6:01PM

Based on the information supplied, no fee is required.

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| Federal Communications Commission Approved by OM  |           | Approved by OMB IL  | OR FCC U   | SE ONLY  |
|---|-----------|---|------------|--|
| Washington, D.C. 20554  3060-1115 (February 2009)   |           |   |            |  |
| FCC 388   |           |   |            | MISSION USE ONLY   |
| DTV Quarterly Activity Station Report   |           | Station Report  | FILE NO    | 20090406ALH  |
| Licensee<br>GRAY TELEVISION LICENSEE, LLC   |           |   |            |  |
| Call Sign<br>KGIN   |           | Facility Id<br>7894   |            | Previous Call Sign (if applicable)                       |
| Community of License  |           |   |            |  |
| City  | State     | County  | Zip Code   |  |
| GRAND ISLAND  | NE        | HALL  | 68801 -    | 6107   |
| Nielsen DMA<br>LINCOLN & HASTINGS-KRNY  |           | World Wide Web Home Page Address<br>HTTP://WWW.KOLNKGIN.COM |            | Licensee Renewal Expiration Date (mm/dd/yyyy) 06/01/2006 |
| Channel Numbers: (Check the   | Channel N | umber(s) to which this form app                             | lies.)     |  |
| ▼ Analog 11   |           |   |            |  |
| Digital   |           |   |            |  |
| 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)? |           |   |            |  |
| C Option One (A and D) Option Two (B and D) Option Three (C and D)  |           |   |            |  |
| Over the past quarter, have you fully complied with the requirements of this option?  • Yes C No  |           |   | € Yes CNo  |  |
| Simulcasting:   |           |   |            |  |
| Are you simulcasting on your Analog channel and your primary Digital stream?  |           |   | € Yes C No |  |
| Application Purpose:  |           |   |            |  |
| © DTV Education Report  |           |   |            |  |
| C Amendment   |           |   | Fil        | e 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 CS          | Is 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 | 575   |  |
| Total 5:00 a.m. to 1:00 a.m. CSTs | 378   |  |

|   | proving a second correction and in the last quarter from 6:00 a m. to   |
|---|---|
| For informational purposes only, 9:00 a.m.? | , how many DTV PSAs and CSTs did your station run in the last quarter from 6:00 a.m. to                                       |
| Total 6:00 a.m. to 9:00 a.m.<br>PSAs        | 90  |
| Total 6:00 a.m. to 9:00 a.m.<br>CSTs        | 43  |
| For stations located in the Easter          | rn or Pacific Time Zone, how many DTV PSAs and CSTs did your station run in the last 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 Centr           | al or Mountain Time Zone, how many DTV PSAs and CSTs did your station run in the last p.m.(must average at least 4 per week)? |
| Total 5:00 p.m. to 10:35 p.m.               | 205   |
| PSAs  |   |
| Total 5:00 p.m. to 10:35 p.m.               | 117   |
| CSTs  |   |
| Comments:                                   |   |
|   |   |

### 30 Minute Educational Programs - Last Quarter

| How many 30 minute, DTV-related informational programs di program must be run between the hours of 8:00 a.m. and 11:35 | d your station run during the quarter? At least one such 5 p.m., prior to June 12, 2009. |
|--|--|
| Total number of 30 Minute Informational Programs   | 0  |
| Comments:  |  |

### 100-Day Countdown - Last Quarter

### 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.) luring the quarter? The comment box may be used to describe these initiatives. | • Yes No |

| Comments: BEGINNING TWO WEEKS BEFORE THE DIGITAL SWITCH, NEWS STORIES RELATED TO THE DTV TRANSITION AIRED EVERY DAY. THE STORIES EDUCATED VIEWERS ON TOPICS RANGING FROM HOOKING UP A CONVERTER BOX, TO RESCANNING YOUR TV, TO SELECTING AN ANTENNA. EVERY STORY INCLUDED RESOURCES FOR MORE INFORMATION (HOTLINES, WEBSITES). MANY DIFFERENT PUBLIC SERVICE ANNOUNCEMENTS WERE PRODUCED AND AIRED, DETAILING HOW THE TRANSITION WOULD AFFECT THE STATION'S COVERAGE AREA, THE NEED TO RESCAN, AND CONTANT REMINDERS OF THE TRANSITION DATE.   |            |  |  |
|--|------------|--|--|
| Station Website Additional Activity Related to the DTV Transition - Last Quarter   |            |  |  |
| Does your station have a Website?  | € Yes C 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.   | € Yes CNo  |  |  |
| Comments: A SPECIAL DTV PAGE EXPLAINED THE TRANSITION, CONTAINED A COUNTDOWN TO OUR TRANSITION DATE, FAQ, LINKS TO THE CONVERTER BOX PROGRAM, ANTENNA HELP, AND MORE. AS THE TRANSITION APPROACHED, DTV "HOTLINE" NUMBERS, INCLUDING THE FCC, THE STATION'S DTV PHONE BANK, THE NEBRASKA HUMAN SERVICES HOTLINE, AND NEBRASKA EDUCATIONAL TELECOMMUNICATIONS WERE POSTED FROMINENTLY FOR USERS SEEKING DTV TECHNICAL SUPPORT. MAPS DETAILING OUR COVERAGE BEFORE AND AFTER THE SWITCH WERE ALSO POSTED. A CRAWL AT THE TOP OF OUR WEBSITE NOTIFIED USERS OF THE SWITCH. IN ADDITION, ALL DTV-RELATED NEWS STORIES WERE AVAILABLE TO WATCH ONLINE AT OUR DTV PAGE.  |            |  |  |
| 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.  |            |  |  |
| Speaking Engagements   |            |  |  |
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| Community Events   |            |  |  |
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| This comment box may be used to include other comments or information about your station's DTV activity over the last quarter.   |            |  |  |
| Comments:  |            |  |  |

| Station Certification  I certify that the statements in this document are true, complete, and correct to the best of my knowledge and belief, and an made in good faith. |  |
|--|--|
| Typed or Printed Name of Person Signing  | Typed or Printed Title of Person Signing NIKKI BATES |
| Signature<br>NIKKI BATES   | Date (mm/dd/yyyy)<br>04/06/2009                      |

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