

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-1115 (March 2008)	FOR FCC USE ONLY
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FCC 388 DTV Quarterly Activity Station Report	FOR COMMISSION USE ONLY FILE NO. -20090109ALI
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Licensee SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT		
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Call Sign KCSM-TV	Facility Id 58912	Previous Call Sign (if applicable)
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Community of License			
City	State	County	Zip Code
SAN MATEO	CA	SAN MATEO	94402 -

Nielsen DMA SAN FRANCISCO-OAK-SAN JOSE	World Wide Web Home Page Address WWW.KCSM.ORG	Licensee Renewal Expiration Date (mm/dd/yyyy) 12/01/2006
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Channel Numbers: (Check the Channel Number(s) to which this form applies.)		
<input checked="" type="checkbox"/> Analog	60	
<input checked="" type="checkbox"/> Digital	43	

Report reflects information for quarter ending: 12/31/2008
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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 type="radio"/> Option Two (B and D) <input checked="" type="radio"/> Option Three (C and D)
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Over the past quarter, have you fully complied with the requirements of this option?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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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.
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Section C (For Noncommercial broadcasters only)

On its analog channel, and its primary digital stream, a station must air 60 seconds per day of on-air consumer education, in variable timeslots, including at least 7.5 minutes per month between 6 pm and 12 am. Beginning May 1, 2008, this requirement doubles, and beginning November 1, 2008, it increases again, to 180 seconds per day and 22.5 minutes per month between 6 pm and midnight. It must also run one 30 minute transition education piece once (See rules for additional details).

Have you aired a sufficient amount of consumer education (60, 120, or 180 seconds per day, depending on the date) during each day this quarter?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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30 Minute Educational Programs - Last Quarter
How many 30 minute, DTV-related informational programs did your station run during the quarter? The

comment box may be used to describe this activity. At least one such program must be run between the hours of 8:00 a.m. and 11:35 p.m., prior to February 17, 2009.

Total number of 30 Minute Informational Programs 2

Comments:

AIRED ON THE FOLLOWING DAYS:

10/21/2008 @ 18:00:00

12/02/2008 @ 18:00:00

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
<p>Comments:</p> <p>KCSM PARTICIPATED IN THE COORDINATED "SOFT SHUTDOWNS" IN THE SAN FRANCISCO BAY AREA ON THE FOLLOWING DATES:</p> <p>10/21/2008</p> <p>12/02/2008</p>	
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
<p>Comments:</p> <p>LINKS TO THE FOLLOWING SITES:</p> <p>WWW.DTV2009.GOV</p> <p>DRVANSWERS.COM</p> <p>WWW.DTV.GOV</p> <p>EMAIL LINK TO KCSM ENGINEERING DEPARTMENT</p>	
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 checked="" type="checkbox"/> Speaking Engagements <p>Comments:</p> <p>OCTOBER 21, 2008: PRESENTATION AT THE MILLBRAE WOMEN'S CLUB</p>	
<input type="checkbox"/> Community Events <p>Comments:</p>	
<input type="checkbox"/> Other (describe) <p>Comments:</p>	
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 are made in good faith.

Typed or Printed Name of Person Signing	Typed or Printed Title of Person Signing DIRECTOR OF ENGINEERING
Signature MICHELE I. MULLER	Date (mm/dd/yyyy) 01/09/2009

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).