

Federal Communications Commission

WDCW

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Account number: 670399**

**Description: 1ST QUARTER 2009 DTV ACTIVITY REPORT
Application Reference Number: 20090410AEH
Successfully filed at Apr 10 2009 11:24AM**

Based on the information supplied, no fee is required.

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| 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. BDERCT-20090410AEH | |
| Licensee WDCW BROADCASTING, INC., DEBTOR-IN-POSSESSION | | | | | |
| Call Sign WDCW | | Facility Id 30576 | | Previous Call Sign (if applicable) | |
| Community of License | | | | | |
| City | | State | County | | Zip Code |
| WASHINGTON | | DC | NA | | 20007 - |
| Nielsen DMA WASHINGTON DC (HAGRSTWN) | | World Wide Web Home Page Address WWW.DC50TV.COM | | Licensee Renewal Expiration Date (mm/dd/yyyy) 10/01/2012 | |
| Channel Numbers: (Check the Channel Number(s) to which this form applies.) | | | | | |
| <input checked="" type="checkbox"/> Analog | 50 | | | | |
| <input checked="" type="checkbox"/> Digital | 51 | | | | |
| 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

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| How many DTV PSAs and CSTs did your station run between 5:00 a.m. and 1:00 a.m. last quarter? |
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| Total 5:00 a.m. to 1:00 a.m. PSAs | 410 |
| Total 5:00 a.m. to 1:00 a.m. CSTs | 460 |
| 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 | 27 |
| Total 6:00 a.m. to 9:00 a.m. CSTs | 14 |
| 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 | 120 |
| Total 6:00 p.m. to 11:35 p.m. CSTs | 108 |
| 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 | |
| Total 5:00 p.m. to 10:35 p.m. CSTs | |
| Comments: | |

30 Minute Educational Programs - Last Quarter

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| 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 |
| Comments: | |

100-Day Countdown - Last Quarter

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| 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. | |
| 35 | <i>Graphic Displays</i> |
| 0 | <i>Animated Graphics</i> |
| 0 | <i>Graphic and Audio Displays</i> |
| 0 | <i>Longer Form Reminders</i> |
| Comments: | |

DUE TO IMPENDING LEGISLATION REGARDING AN EXTENSION OF THE DTV TRANSITION DEADLINE, THE COUNTDOWN CLOCK WAS STOPPED ON FEBRUARY 4, 2009.

Section D (For all broadcasters)

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| 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: SHERMAZE INGRAM, SENIOR DIRECTOR OF MEDIA RELATIONS, DIGITAL TRANSITION WITH THE NATIONAL ASSOCIATION OF BROADCASTERS WAS A GUEST ON THE WEEKEND NEWS WITH CHRIS GORE ON ON FEBRUARY 14TH, AND AGAIN ON FEBRUARY 15, 2009. | |
| 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: THE DTV TRANSITION LINK ON THE STATION'S WEBSITE LINKS TO A PAGE CONTAINING A VARIETY OF INFORMATION ABOUT THE DIGITAL TRANSITION INCLUDING A VIDEO PLAYER FEATURING DIFFERENT STREAMING VIDEO SEGMENTS RELATING TO THE DIGITAL TRANSITION, SUCH AS THE COUPON PROGRAM, DTV SHOPPING TIPS, AND "WHAT YOU NEED TO KNOW". IN ADDITION TO THE VIDEO LINKS, THERE IS AN ARTICLE REGARDING THE TRANSITION, WHICH REVIEWS BASIC INFORMATION, INCLUDING AN EXPLANATION WHICH DETAILS THE TRANSITION TO DIGITAL TV, AS WELL AS AN EXPLANATION WHICH PROVIDES INFORMATION ON HOW ANALOG TV SETS WILL NEED ADDITIONAL EQUIPMENT (A CONVERTER BOX) TO RECEIVE OVER-THE-AIR TELEVISION WHEN THE DTV TRANSITION PERIOD ENDS. THE ARTICLE ALSO INCLUDES INFORMATION REGARDING THE CONVERTER BOX COUPON PROGRAM, CABLE AND SATELLITE TV ARE/ARE NOT AFFECTED BY THE TRANSITION AND AN EXPLANATION ON HOW DTV IS NOT THE SAME AS HDTV. UNDER THE SIDEBAR ON THE RIGHT HAND SIDE OF THE PAGE, THE STATION PROVIDES A LIST OF HELPFUL RESOURCES AND LINKS TO VARIOUS OTHER WEBSITES PERTAINING TO THE DIGITAL TRANSITION, INCLUDING DTV.GOV, DTVTRANSITION.ORG, THE TV CONVERTER BOX COUPON PROGRAM, DTVANSWERS.COM; FCC CONSUMER FACTS, A LINK TO THE NATIONAL ASSOCIATION OF BROADCASTERS, "HOW TO TUNE YOUR ANTENNA" AND "DTV-WHAT EVERY CONSUMER SHOULD KNOW". | |
| 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: | |

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| <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: |

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| 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 PROGRAMMING COORDINATOR |
| Signature TANYA VAN POOL | Date (mm/dd/yyyy) 04/02/2009 |

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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