FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APF	OMB APPROVAL						
OMB Number: 3235-010							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BECKERT JOHN A 2. Date of Event Requiring Statement (Month/Day/Year) 09/12/2011			nent	3. Issuer Name and Ticker or Trading Symbol A. H. Belo CORP [AHC]								
(Last) 508 YOUNG (Street) DALLAS (City)	(First) STREET TX (State)	(Middle) 75202 (Zip)	_			ationship of Reporting Perso c all applicable) Director Officer (give title below)	n(s) to Issuer 10% Owner Other (specify below)		6. Inc	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
			Table I - Non	-Derivat	tive S	ecurities Beneficiall	y Owned		,			
1. Title of Security (Instr. 4)					ınt of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
NO SECURITIES BENEFICIALLY OWNED						0	D					
		(e.				urities Beneficially options, convertible		es)				
Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Conve		ercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)				
							Amount or Number	Price Deriva Secur	tive	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

JOHN A. BECKERT

09/12/2011

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).