FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

	dress of Reportin	2. Date of Event Requiring Staten (Month/Day/Year 01/22/2008	nent	3. Issuer Name <b>and</b> Ticker or Trading Symbol A. H. Belo CORP [ AHC ]								
(Last) (First) (Middle) P.O. BOX 224866		(Middle)			Relationship of Reporting Pers (Check all applicable)     X Director		son(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) DALLAS (City)	TX (State)	75222-4866 (Zip)				Officer (give title below)	Other (sp. below)	ecify	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	-Derivati	ive 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)				
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable Expiration Date (Month/Day/Year)			ate	3. Title and Amount of Security Underlying Derivative Security			(Instr. 4) Conve		5. Ownership Form:	(Instr. 5)		
			Date	Expiration			Amount or Number of	Price Deriva Secur	ative	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Laurence E. Hirsch

01/23/2008

\*\* 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.

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

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).