FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL											
OMB Number:	3235-03										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 3235-0362 Estimated average burden hours per response: 1.0

Form 4 Transactions Reported.

Form 3 Holdings Reported.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Form 4	Transactions F	Reported.		or Section 3	30(h) d	of the Ir	nvestm	nent Co	mpany Ac	t of 194	0						
Name and Address of Reporting Person* MORONEY JAMES M III			2. Issuer Name and Ticker or Trading Symbol A. H. Belo CORP [AHC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) A. H. BELO CORPORATION P.O. BOX 224866				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2008								X	Office below	er (give title w) P/Publ &	Oth belo Dallas 1	er (specify ow) News	
				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) DALLAS	S TX	. 7	75222-4866									X		filed by O filed by M on			
(City)	(Sta	ate) (Zip)														
		Tab	e I - Non-Deriv	ative Secu	ıritie	s Acc	quire	d, Dis	sposed o	of, or	Benefic	ially	y Owne	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4					5. Amount of Securities		6. Ownership		7. Nature of Indirect Beneficial	
		(MOIIIII/Day/Teal)					Amou	nt	(A) or (D) Price			Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Form: Direct (D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)	
SERIES A COMMON STOCK 09/18		09/18/2008			G		1,	,000	D	\$0		8,376		D			
SERIES A COMMON STOCK												960		I E		By Spouse ⁽¹⁾	
SERIES A	A COMMO	N STOCK											11,	,129		Ι	By Family LP ⁽²⁾
SERIES A COMMON STOCK											59,730			I	By Father's Estate ⁽³⁾		
SERIES A COMMON STOCK													9	91		I	By 401k Account ⁽⁴⁾
		Ta	ıble II - Derivat (e.g., p	ive Securi uts, calls,		-						-	Dwned				
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date,	4. Transaction Code (Instr. 8)	5. Nu of Deriv Secu Acqu (A) o Disp of (D (Inst	5. Number of		pate Exercisable and cpiration Date lonth/Day/Year)				8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownersh Form: Direct (D or Indire g (I) (Instr.		Beneficial Ownershi ect (Instr. 4)
					(A)	(D)	Date Exerc	cisable	Expiration Date	n Title	Amour or Numbe of Shares	er					

Explanation of Responses:

- 1. The reporting person disclaims beneficial ownership of these securities.
- 2. The reporting person is the managing general partner of the family partnership that owns the reported securities. The reporting person disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.
- 3. The reporting person is the executor of the Estate of James M. Moroney, Jr., the owner of the reported securities. The reporting person disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.
- 4. Held by the A. H. Belo Savings Plan as of December 31, 2008.

James M. Moroney III 02/09/2009

** Signature of Reporting Person Da

Data

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

- * If the form is filed by more than one reporting person, see Instruction 4 (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).

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.