

1.) CORPORATION NAME: <b>R. R. Donnelley Printing Company</b>	DUE DATE: <b>12/31/2014</b>								
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA</b>	SCC ID NO: <b>F0221848</b>								
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td style="text-align: center;">2,020</td> </tr> <tr> <td>COMB</td> <td style="text-align: center;">1,980</td> </tr> <tr> <td>PREFER</td> <td style="text-align: center;">9,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMA	2,020	COMB	1,980	PREFER	9,000
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COMA	2,020								
COMB	1,980								
PREFER	9,000								
4.) STATE OR COUNTRY OF INCORPORATION: <b>DE</b>									

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 111 SOUTH WACKER DRIVE

CITY/ST/ZIP: CHICAGO, IL 60606

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JANET HALPIN TITLE: PRESIDENT ADDRESS: 111 SOUTH WACKER DRIVE CITY/ST/ZIP/CO: CHICAGO, IL 60606	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: DANIEL L KNOTTS TITLE: PRESIDENT ADDRESS: 111 SOUTH WACKER DRIVE CITY/ST/ZIP/CO: CHICAGO, IL 60606	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: CHRISTINE MAKI TITLE: SR VP-TAX ADDRESS: 111 SOUTH WACKER DRIVE CITY/ST/ZIP/CO: CHICAGO, IL 60606	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: SUE BETTMAN TITLE: SECRETARY ADDRESS: 111 SOUTH WACKER DRIVE CITY/ST/ZIP/CO: CHICAGO, IL 60606	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: MAUREEN KOPP TITLE: ASST SECRETARY ADDRESS: 111 SOUTH WACKER DRIVE CITY/ST/ZIP/CO: CHICAGO, IL 60606	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ SUE BETTMAN <small>SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT</small>	SUE BETTMAN, SECRETARY <small>PRINTED NAME AND CORPORATE TITLE</small>	12/8/2014 <small>DATE</small>
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.