

**Alternative Reporting And Disclosure Statement  
For Nonqualified Deferred Compensation Plans**

To: Top Hat Plan Exemption  
Employee Benefits Security Administration  
Room N 1513  
U.S. Department of Labor  
200 Constitution Ave. N.W.  
Washington, DC 20210

2013 FEB 26 PM 4:03  
EBSA/REGULIO/REGIO

In compliance with the requirements of the alternative method of reporting and disclosure under Part I of Title I of the Employee Retirement Income Security Act of 1974 for un-funded or insured pension plans for a select group of management or highly compensated employees, specified in Department of Labor Regulations, 29 CFR Sec. 2520.104-23, the following information is provided by the undersigned administrator:

1. The name of the Employer is: The Gazette Company
2. The mailing address of the Employer is: 500 3<sup>rd</sup> Avenue SE  
Cedar Rapids, IA 52401
3. The Employer Identification Number is: 42-0269570
4. The above named Employer maintains a Plan (or Plans) primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees.
5. Number of Plans and Eligible Employees in each Plan:  
One Plan(s) covering 15 Eligible Employees.
6. The Employer will provide a copy of the agreement(s) to the office of Employee Benefits Security Administration upon request.

The Gazette Company  
A Iowa Corporation

By: *Anthony Strunkina*  
Authorized Person

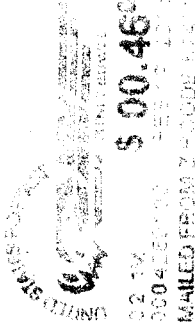
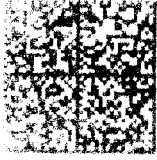
Dated: 2-19-13



**Gazette  
Communications**

PO Box 511 • Cedar Rapids, IA 52406-0511

ADDRESS SERVICE REQUESTED



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Employee Benefits Security Admin.  
Room N1513  
US Department of Labor  
200 Constitution Ave N.W  
Washington, DC 20540