Cody John E Form 3

March 04, 20	011								
FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL		
Washington, D.C. 20549							OMB Number:	3235-0104	
		INITIAL S	STATEMEN			OWNERSH	IP OF	Expires:	January 31, 2005
				SECURI	ECURITIES			Estimated	
		on $17(a)$ of		Itility Holdi	ng Compan	Exchange Act y Act of 193: ct of 1940		burden hou response n	
(Print or Type I	Responses)								
Person <u>*</u> Statem			Statement (Month/Day/				rmbol		
(Last)	(First)	(Middle)	02/23/2011	l	4. Relationsh Person(s) to	nip of Reporting Issuer		Amendment, I I(Month/Day/Ye	-
C/O GANN INC., 795 DRIVE		BRANCH			(Checl	k all applicable)		× •	,
(Street)				OfficerOther 6. 1 (give title below) (specify below) File			ndividual or Joint/Group ng(Check Applicable Line) Form filed by One Reporting		
MCLEAN,	A VAA 22	107					F	Form filed by Mo rting Person	re than One
(City)	(State)	(Zip)		Table I - N	Non-Deriva	tive Securiti	es Benefic	cially Owned	ł
1.Title of Secu (Instr. 4)	rity			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	f Indirect Bene	ficial
No securitie	s are bene	ficially own	ned.	0		D	Â		
Reminder: Rep owned directly			ach class of sec	urities benefic	ially	SEC 1473 (7-02	)		
	infor requi	mation cont ired to resp	pond to the c ained in this ond unless th MB control n	form are not e form disp	t				
r	fable II - De	erivative Secu	rities Beneficia	ally Owned (e	e.g., puts, calls	s, warrants, opt	tions, conver	tible securitie	s)
1 174 ( )			( E · 11	1 2 7 1	1.4	6 4	5		CT II (

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships				
	Director	10% Owner	Officer	Other	
Cody John E C/O GANNETT CO., INC. 7950 JONES BRANCH DRIVE MCLEAN, VA 22107	ÂX	Â	Â	Â	
Signatures					
/s/ Todd A. Mayman, Attorney-in-Fact		03/04/2011			
**Signature of Reporting Person		Date			

## **Explanation of Responses:**

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.