

GANNETT CO INC /DE/
Form 5
February 04, 2002

OMB APPROVAL

OMB Number
Expires:
Estimated average burden
hours per response 1.0

U.S. SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM 5

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or
Section 30(f) of the Investment Company Act of 1940

- Check this box if no longer subject of Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
- Form 3 Holdings Reported
- Form 4 Transactions Reported

=====

1. Name and Address of Reporting Person*

Chapple	Thomas	L.	
-----	-----	-----	-----
(Last)	(First)	(Middle)	
Gannett Co., Inc.		7950 Jones Branch Drive	
-----		-----	
		(Street)	
McLean	Virginia		22107
-----	-----	-----	-----
(City)	(State)		(Zip)

=====

2. Issuer Name and Ticker or Trading Symbol

Gannett Co., Inc. ("GCI")
=====

3. IRS or Social Security Number of Reporting Person (Voluntary)

=====

4. Statement for Month/Year

December, 2001
=====

5. If Amendment, Date of Original (Month/Year)

Edgar Filing: GANNETT CO INC /DE/ - Form 5

=====
Explanation of Responses:

- (1) Held by the trustee of the Company's Deferred Compensation Plan, The Northern Trust Company.
- (2) Held by the trustee of the Company's 401(k) Plan, Boston Safe Deposit and Trust Company.
- (3) Held by the trustee of the Company's Dividend Reinvestment Plan, Wells Fargo Bank Minnesota.

/s/Thomas L. Chapple

02/04/02

**Signature of Reporting Person

Date

** 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 provided is insufficient, see Instruction 6 for procedure.

Alternatively, this Form is permitted to be submitted to the Commission in electronic format at the option of the reporting person pursuant to Rule 101(b)(4) of Regulation S-T.