Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [X] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
LAKE COUNTY PRESS, INC. DEFERRED COMPENSATION PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 09/01/1986

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)

LAKE COUNTY PRESS, INC.

98 NOLL STREET
WAUKEGAN, IL 60085

2b Employer Identification Number (EIN)
36-2699383

2c Sponsor's telephone number
847-336-4333

2d Business code (see instructions)
323100

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	12/03/2013	DEE KRATZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	188
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	149
b	Retired or separated participants receiving benefits	**6b**	3
c	Other retired or separated participants entitled to future benefits	**6c**	24
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	176
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	176
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	138
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2G 2J 2K 2F 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] ___ **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2012** **This Form is Open to Public Inspection.**

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
LAKE COUNTY PRESS, INC. DEFERRED COMPENSATION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
LAKE COUNTY PRESS, INC.

D Employer Identification Number (EIN)
36-2699383

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

AMERICAN FUNDS
333 SOUTH HOPE STREET
LOS ANGELES, CA 90071-1406

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

CALAMOS FUNDS
2020 CALAMOS COURT
NAPERVILLE, IL 60563

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

FIDELITY INVESTMENTS
PO BOX 77001
CINCINNATI, OH 45277-0003

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

GOLDMAN SACHS FUNDS
PO BOX 219711
KANSAS CITY, MO 64121

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

JANUS FUNDS

151 DETROIT STREET
DENVER, CO 80206-4805

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

THE MUNDER FUNDS

ATT SECRETARY
480 PIERCE STREET
BIRMINGHAM, MI 48009

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

OPPENHEIMER FUNDS SERVICES

PO BOX 5270
DENVER, CO 80217-5270

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

PRUDENTIAL MUTUAL FUNDS

PO BOX 9658
PROVIDENCE, RI 02940

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

ABERDEEN FUNDS

PO BOX 55930
BOSTON, MA 02205-5930

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

NUVEEN INVESTOR SERVICES

PO BOX 8530
BOSTON, MA 02266-8530

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

VERISIGHT, INC.

27-2037969

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37	NONE	3750	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

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(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2012

This Form is Open to Public Inspection

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
LAKE COUNTY PRESS, INC. DEFERRED COMPENSATION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
LAKE COUNTY PRESS, INC.

D Employer Identification Number (EIN)
36-2699383

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)	0	
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1847	33173
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	386529	577129
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	14427160	15052123
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	14815536	15662425
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		18107
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	18107
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	14815536	15644318

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	395850	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		395850
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	13999	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		13999
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	201573	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		201573
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1704693
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		2316115
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1472602	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	9898	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		1482500
f Corrective distributions (see instructions)	2f		610
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	4223	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		4223
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1487333
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		828782
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: SWARTZTRAUBER & CO **(2)** EIN: 36-4772389

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		750000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If "Yes," enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

Part V Trust Information (optional)

6a Name of trust	**6b** Trust's EIN

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
LAKE COUNTY PRESS, INC. DEFERRED COMPENSATION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
LAKE COUNTY PRESS, INC.

D Employer Identification Number (EIN)
36-2699383

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1**

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 36-6851902 27-3169253

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a	The current year	**14a**	
b	The plan year immediately preceding the current plan year	**14b**	
c	The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a	The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b	The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a	Enter the number of employers who withdrew during the preceding plan year	**16a**	
b	If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

LAKE COUNTY PRESS, INC.
Deferred Compensation Plan

ANNUAL FINANCIAL REPORT
DECEMBER 31, 2012

Lake County Press, Inc.
Deferred Compensation Plan

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Swarztrauber & Co.
Certified Public Accountants

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P.O. Box 1160
Waukegan, IL 60079-1160
847.662.1960
Fax: 847-662.1903
e-mail: cpa@swarztrauber.com

November 22, 2013

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Lake County Press, Inc.
Deferred Compensation Plan
Waukegan, Illinois 60085

Report on the Financial Statements

We have audited the accompanying financial statements of the Lake County Press, Inc. Deferred Compensation Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2012 and 2011, and the changes in its net assets available for benefits for the year(s) then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets Held at End of Year as of December 31, 2012, is referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Certified Public Accountants

Lake County Press, Inc.
Deferred Compensation Plan
Comparative Statements of Net Assets Available for Benefits
December 31, 2012 and 2011

	2012	2011
Assets		
Cash with financial institution	$ 33,173	$ 1,847
Participants - directed investments		
Mutual funds	$ 15,052,123	$ 14,427,160
Participant loans	577,129	386,529
Total participant-directed investments	$ 15,629,252	$ 14,813,689
Total assets	$ 15,662,425	$ 14,815,536
Liabilities		
Due to participants	$ 18,107	
Net Assets Available for Benefits	$ 15,644,318	$ 14,815,536

The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
Comparative Statements of Changes in Net Assets Available for Benefits
December 31, 2012 and 2011

	2012	2011
Additions to Net Assets		
Contributions- employees	$ 395,850	$ 424,463
Investment income		
Interest on participant loans	$ 13,999	$ 14,412
Mutual fund dividends	201,573	412,493
Net appreciation (depreciation) in fair value of mutual funds	1,704,693	(676,420)
Total investment income (loss)	$ 1,920,265	$ (249,515)
Total additions	$ 2,316,115	$ 174,948
Deductions from Net Assets		
Benefits paid directly to participants or beneficiaries	$ 1,483,110	$ 919,599
Administrative expenses	4,223	3,000
Total deductions	$ 1,487,333	$ 922,599
Net Increase (Decrease)	$ 828,782	$ (747,651)
Net Assets Available for Benefits		
Beginning of year	14,815,536	15,563,187
End of year	$ 15,644,318	$ 14,815,536

The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
Notes to Financial Statements
December 31, 2012

NOTE 1 – PLAN DESCRIPTION

The following description of Lake County Press, Inc. Deferred Compensation Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full–time employees of Lake County Press, Inc. (the Company) who have completed 500 hours of service within six months and are age 20 or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

The Plan provides for employee salary 401(k) contributions up to a maximum of 100 percent of their annual compensation subject to maximum tax-deferred limitations established by the Internal Revenue Code. Participants may also make contributions to the Plan in the form of a rollover of funds from another qualified plan.

The Plan provided for employer-matching contributions of 25 percent of the participant's deferred compensation that does not exceed 5 percent of the employee's compensation. On April 6, 2009, the Company adopted an amendment and notified employees that the employer-matching contributions would be suspended. On March 1, 2010, the employer executed a complete restatement of the plan. Effective January 1, 2010 the match was reinstated as a discretionary match, not as a fixed match.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of the Company's contributions and plan earnings and charged with an allocation of administrative expenses. Allocations are based on a participant's compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may direct the investments of their account balances into various investment options offered by the Plan.

Vesting

Participant contribution and the employer-match contribution and related earnings are fully vested at all times and are not subject to forfeiture for any reason.

Participant Loans

Participants may borrow from their accounts a minimum of $1,000 up to a maximum of 50 percent of their account balance, not to exceed $50,000. Loans are collateralized by the participant's account balance and bear interest at a market rate and are payable through participant payroll withholdings under a reasonable repayment schedule of not more than 20 years for loans related to the purchase of a principal residence and five years for other loans. Principal and interest is paid ratably through payroll deductions.

Benefit Payments

Distributions are payable upon attainment of age 59 ½, retirement, death, disability or termination of employment in the form of a lump-sum amount equal to the vested balance of a participant's account.

Hardship Withdrawals

Participants may request that all or a portion of their account be distributed in the case of severe financial hardship, as defined in the plan document. The Company must approve any such hardship withdrawals.

Party – In - Interest Transactions

Certain plan assets were in investment funds managed by Fidelity Investments. Fidelity Investments was the custodian of the Plan; therefore, these transactions qualify as party-in-interest transactions as defined under ERISA guidelines. In September, 2012, Verisight Trust became the custodian of the funds

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review

Subsequent events have been evaluated by management through November 22, 2013, which approximates the date the financial statements were available to be issued.

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting. Investment contracts held by a defined contribution plan are required to be reported at fair value.

Participant Loans-

Participant loans are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are recorded in the recorded loan balances based on the terms of the Plan document.

Investment Valuation –

The Plan's investments in mutual funds are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Net appreciation includes the plan's gains and loss on investments bought and sold as well as held during the year.

Benefit Payments –

Benefits are recorded when paid.

Expenses –

The Company pays substantially all administrative and consulting expenses. Any asset-related fees are paid by the Plan.

Use of Estimates –

The preparation of financial statements in conformity with accounting principals generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

NOTE 3 – INVESTMENTS

The Plan's assets are held by the Trustee of the Plan. Employer and employee contributions are held and managed by the Trustee, which invests cash received, interest and dividend income and makes distributions to participants.

During the year 2012, the Plan's investments in registered investment companies appreciated by $1,704,693. This appreciation is reported in investment income.

The following presents investments that represent 5% or more of the Plan's net assets available for benefits.

	2012	2011
Fidelity Investments		
American Balanced Funds	$1,907,270	$ 2,143,853
American Investment Company of America	2,257,092	2,140,200
American Mutual Fund	924,091	907,590
Munder Index 500	939,392	1,053,652
Fidelity U.S. Government Reserves	3,135,382	2,411,370
American Europacific Growth	1,253,526	1,238,488
Calamos Growth Fund	1,111,697	1,118,077
American Growth Fund of America	1,071,317	1,048,217

The Plan categorizes its financial instruments recorded at fair value into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets that the Plan has the ability to assess (Level 1). Investments whose values are based on quoted prices in markets that are not active or model inputs that are observable either directly or indirectly for substantially their full term are designated as Level 2. Investments whose values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement process are designated as Level 3. If the inputs used to measure the financial statements fall within different levels of the hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the instrument. All the Plan's mutual fund investments have been designated Level 1.

NOTE 4 – TAX STATUS

The Plan is a prototype plan. The prototype plan has received a favorable opinion letter from the Internal Revenue Service (IRS) that the prototype plan, as designed, is qualified for federal income tax-exempt status. The Plan has not individually sought its own determination letter. Effective April 6, 2010, the Company adopted an amendment regarding the suspension of the employer-matching contribution. Because filing this amendment with the Internal Revenue Service is optional, the Company chose not to file. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore believes that the Plan is qualified and the related trust is tax-exempt.

The Plan administrator believes that the Plan is no longer subject to income tax examinations for years prior to 2007.

NOTE 5- RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits

NOTE 6- PLAN TERMINATION

While it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in the plan agreement and the Employee Retirement Security Act of 1974 (ERISA).

Lake County Press, Inc.
Deferred Compensation Plan
Schedule of Assets Held at End of Year
Form 5500, Schedule H, Line 4i
EIN 36-2699383, Plan No. 001
December 31, 2012

(a)(b) Identity of Issuer		(c) Description of Investment	(d) Cost	(e) Current Value
Fidelity Investments		Mutual Funds		
		Aberdeen Small Cap Fund Class A	**	$ 116,542
		American Balanced Fund Class A	**	1,907,270
		American Bond Fund of America Class A	**	731,860
		American Europacific Growth Class A	**	1,253,526
		American Growth Fund of America Class A	**	1,071,317
		American Investment Company of America	**	2,257,092
		American Mutual Fund Class A	**	924,091
		Calamos Growth Fund Class A	**	1,111,697
	*	Fidelity Advisor Leverged Co Class A	**	689,740
	*	Fidelity U.S. Government Reserves	**	
		Goldman Sachs High Yield Class A	**	168,457
		Goldman Sachs Strategic Int'l Eq Class A	**	97,943
		Munder Index 500 Class A	**	939,392
		Nuveen Small Cap Class A	**	166,612
		Oppenheimer Int'l Bond Class A	**	163,653
		Perkins Mid-Cap Value Class A	**	241,341
		Prudential Global Real Estate Fund Class A	**	76,208
	*	Fidelity Cash Reserve Fund	**	3,135,382
Participants		Participant loans with interest rates ranging from 3.25 percent to 6.0 percent**	-0-	429,153
				$ 15,481,276

* Fidelity Investments is considered a party in interest

** Cost omitted for participant-directed investments

** Loan repayments are made by participant payroll withholding over a period not to exceed 5 years (20 years for a loan related to the purchase of a principal residence).

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A This return/report is for: ☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____

B This return/report is: ☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. ▶ ☐

D Check box if filing under: ☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan LAKE COUNTY PRESS, INC.
DEFERRED COMPENSATION PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 09/01/1986

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)
LAKE COUNTY PRESS, INC.

98 NOLL STREET

WAUKEGAN IL 60085

2b Employer Identification Number (EIN) 36-2699383

2c Sponsor's telephone number (847) 336-4333

2d Business code (see instructions) 323100

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Robert J. Hilliard	12-2-13	ROBERT HILLIARD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Robert J. Hilliard	12-2-13	ROBERT HILLIARD
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	188
6 Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a Active participants	**6a**	149
b Retired or separated participants receiving benefits	**6b**	3
c Other retired or separated participants entitled to future benefits	**6c**	24
d Subtotal. Add lines **6a**, **6b**, and **6c**.	**6d**	176
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	176
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	138
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2G 2J 2K 2F 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	☐ Insurance	(1)	☐ Insurance
(2)	☐ Code section 412(e)(3) insurance contracts	(2)	☐ Code section 412(e)(3) insurance contracts
(3)	☒ Trust	(3)	☒ Trust
(4)	☐ General assets of the sponsor	(4)	☐ General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules		**b General Schedules**	
(1)	☒ **R** (Retirement Plan Information)	(1)	☒ **H** (Financial Information)
(2)	☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2)	☐ **I** (Financial Information – Small Plan)
		(3)	☐ **A** (Insurance Information)
		(4)	☒ **C** (Service Provider Information)
(3)	☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5)	☐ **D** (DFE/Participating Plan Information)
		(6)	☐ **G** (Financial Transaction Schedules)

LAKE COUNTY PRESS, INC.
Deferred Compensation Plan

ANNUAL FINANCIAL REPORT
DECEMBER 31, 2012

Lake County Press, Inc.
Deferred Compensation Plan

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Swarztrauber & Co.
Certified Public Accountants

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November 22, 2013

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Lake County Press, Inc.
Deferred Compensation Plan
Waukegan, Illinois 60085

Report on the Financial Statements

We have audited the accompanying financial statements of the Lake County Press, Inc. Deferred Compensation Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2012 and 2011, and the changes in its net assets available for benefits for the year(s) then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets Held at End of Year as of December 31, 2012, is referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Certified Public Accountants

Lake County Press, Inc.
Deferred Compensation Plan
Comparative Statements of Net Assets Available for Benefits
December 31, 2012 and 2011

	2012	2011
Assets		
Cash with financial institution	$ 33,173	$ 1,847
Participants - directed investments		
Mutual funds	$ 15,052,123	$ 14,427,160
Participant loans	577,129	386,529
Total participant-directed investments	$ 15,629,252	$ 14,813,689
Total assets	$ 15,662,425	$ 14,815,536
Liabilities		
Due to participants	$ 18,107	
Net Assets Available for Benefits	$ 15,644,318	$ 14,815,536

The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
Comparative Statements of Changes in Net Assets Available for Benefits
December 31, 2012 and 2011

	2012	2011
Additions to Net Assets		
Contributions- employees	$ 395,850	$ 424,463
Investment income		
Interest on participant loans	$ 13,999	$ 14,412
Mutual fund dividends	201,573	412,493
Net appreciation (depreciation) in fair value of mutual funds	1,704,693	(676,420)
Total investment income (loss)	$ 1,920,265	$ (249,515)
Total additions	$ 2,316,115	$ 174,948
Deductions from Net Assets		
Benefits paid directly to participants or beneficiaries	$ 1,483,110	$ 919,599
Administrative expenses	4,223	3,000
Total deductions	$ 1,487,333	$ 922,599
Net Increase (Decrease)	$ 828,782	$ (747,651)
Net Assets Available for Benefits		
Beginning of year	14,815,536	15,563,187
End of year	$ 15,644,318	$ 14,815,536

The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
Notes to Financial Statements
December 31, 2012

NOTE 1 – PLAN DESCRIPTION

The following description of Lake County Press, Inc. Deferred Compensation Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full–time employees of Lake County Press, Inc. (the Company) who have completed 500 hours of service within six months and are age 20 or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

The Plan provides for employee salary 401(k) contributions up to a maximum of 100 percent of their annual compensation subject to maximum tax-deferred limitations established by the Internal Revenue Code. Participants may also make contributions to the Plan in the form of a rollover of funds from another qualified plan.

The Plan provided for employer-matching contributions of 25 percent of the participant's deferred compensation that does not exceed 5 percent of the employee's compensation. On April 6, 2009, the Company adopted an amendment and notified employees that the employer-matching contributions would be suspended. On March 1, 2010, the employer executed a complete restatement of the plan. Effective January 1, 2010 the match was reinstated as a discretionary match, not as a fixed match.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of the Company's contributions and plan earnings and charged with an allocation of administrative expenses. Allocations are based on a participant's compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may direct the investments of their account balances into various investment options offered by the Plan.

Vesting

Participant contribution and the employer-match contribution and related earnings are fully vested at all times and are not subject to forfeiture for any reason.

Participant Loans

Participants may borrow from their accounts a minimum of $1,000 up to a maximum of 50 percent of their account balance, not to exceed $50,000. Loans are collateralized by the participant's account balance and bear interest at a market rate and are payable through participant payroll withholdings under a reasonable repayment schedule of not more than 20 years for loans related to the purchase of a principal residence and five years for other loans. Principal and interest is paid ratably through payroll deductions.

Benefit Payments

Distributions are payable upon attainment of age 59 ½, retirement, death, disability or termination of employment in the form of a lump-sum amount equal to the vested balance of a participant's account.

Hardship Withdrawals

Participants may request that all or a portion of their account be distributed in the case of severe financial hardship, as defined in the plan document. The Company must approve any such hardship withdrawals.

Party – In - Interest Transactions

Certain plan assets were in investment funds managed by Fidelity Investments. Fidelity Investments was the custodian of the Plan; therefore, these transactions qualify as party-in-interest transactions as defined under ERISA guidelines. In September, 2012, Verisight Trust became the custodian of the funds

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review

Subsequent events have been evaluated by management through November 22, 2013, which approximates the date the financial statements were available to be issued.

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting. Investment contracts held by a defined contribution plan are required to be reported at fair value.

Participant Loans-

Participant loans are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are recorded in the recorded loan balances based on the terms of the Plan document.

Investment Valuation –

The Plan's investments in mutual funds are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Net appreciation includes the plan's gains and loss on investments bought and sold as well as held during the year.

Benefit Payments –

Benefits are recorded when paid.

Expenses –

The Company pays substantially all administrative and consulting expenses. Any asset-related fees are paid by the Plan.

Use of Estimates –

The preparation of financial statements in conformity with accounting principals generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

NOTE 3 – INVESTMENTS

The Plan's assets are held by the Trustee of the Plan. Employer and employee contributions are held and managed by the Trustee, which invests cash received, interest and dividend income and makes distributions to participants.

During the year 2012, the Plan's investments in registered investment companies appreciated by $1,704,693. This appreciation is reported in investment income.

The following presents investments that represent 5% or more of the Plan's net assets available for benefits.

	2012	2011
Fidelity Investments		
American Balanced Funds	$1,907,270	$ 2,143,853
American Investment Company of America	2,257,092	2,140,200
American Mutual Fund	924,091	907,590
Munder Index 500	939,392	1,053,652
Fidelity U.S. Government Reserves	3,135,382	2,411,370
American Europacific Growth	1,253,526	1,238,488
Calamos Growth Fund	1,111,697	1,118,077
American Growth Fund of America	1,071,317	1,048,217

The Plan categorizes its financial instruments recorded at fair value into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets that the Plan has the ability to assess (Level 1). Investments whose values are based on quoted prices in markets that are not active or model inputs that are observable either directly or indirectly for substantially their full term are designated as Level 2. Investments whose values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement process are designated as Level 3. If the inputs used to measure the financial statements fall within different levels of the hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the instrument. All the Plan's mutual fund investments have been designated Level 1.

NOTE 4 – TAX STATUS

The Plan is a prototype plan. The prototype plan has received a favorable opinion letter from the Internal Revenue Service (IRS) that the prototype plan, as designed, is qualified for federal income tax-exempt status. The Plan has not individually sought its own determination letter. Effective April 6, 2010, the Company adopted an amendment regarding the suspension of the employer-matching contribution. Because filing this amendment with the Internal Revenue Service is optional, the Company chose not to file. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore believes that the Plan is qualified and the related trust is tax-exempt.

The Plan administrator believes that the Plan is no longer subject to income tax examinations for years prior to 2007.

NOTE 5- RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits

NOTE 6- PLAN TERMINATION

While it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in the plan agreement and the Employee Retirement Security Act of 1974 (ERISA).

Lake County Press, Inc.
Deferred Compensation Plan
Schedule of Assets Held at End of Year
Form 5500, Schedule H, Line 4i
EIN 36-2699383, Plan No. 001
December 31, 2012

(a)(b) Identity of Issuer		(c) Description of Investment	(d) Cost	(e) Current Value
Fidelity Investments		Mutual Funds		
		Aberdeen Small Cap Fund Class A	**	$ 116,542
		American Balanced Fund Class A	**	1,907,270
		American Bond Fund of America Class A	**	731,860
		American Europacific Growth Class A	**	1,253,526
		American Growth Fund of America Class A	**	1,071,317
		American Investment Company of America	**	2,257,092
		American Mutual Fund Class A	**	924,091
		Calamos Growth Fund Class A	**	1,111,697
	*	Fidelity Advisor Leverged Co Class A	**	689,740
	*	Fidelity U.S. Government Reserves	**	
		Goldman Sachs High Yield Class A	**	168,457
		Goldman Sachs Strategic Int'l Eq Class A	**	97,943
		Munder Index 500 Class A	**	939,392
		Nuveen Small Cap Class A	**	166,612
		Oppenheimer Int'l Bond Class A	**	163,653
		Perkins Mid-Cap Value Class A	**	241,341
		Prudential Global Real Estate Fund Class A	**	76,208
	*	Fidelity Cash Reserve Fund	**	3,135,382
Participants		Participant loans with interest rates ranging from 3.25 percent to 6.0 percent**	-0-	429,153
				$ 15,481,276

* Fidelity Investments is considered a party in interest

** Cost omitted for participant-directed investments

** Loan repayments are made by participant payroll withholding over a period not to exceed 5 years (20 years for a loan related to the purchase of a principal residence).

LAKE COUNTY PRESS, INC.
Deferred Compensation Plan

ANNUAL FINANCIAL REPORT
DECEMBER 31, 2012

Lake County Press, Inc.
Deferred Compensation Plan

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November 22, 2013

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Lake County Press, Inc.
Deferred Compensation Plan
Waukegan, Illinois 60085

Report on the Financial Statements

We have audited the accompanying financial statements of the Lake County Press, Inc. Deferred Compensation Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2012 and 2011, and the changes in its net assets available for benefits for the year(s) then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets Held at End of Year as of December 31, 2012, is referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Certified Public Accountants

Lake County Press, Inc.
Deferred Compensation Plan
Comparative Statements of Net Assets Available for Benefits
December 31, 2012 and 2011

	2012	2011
Assets		
Cash with financial institution	$ 33,173	$ 1,847
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The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
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December 31, 2012 and 2011

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Net Assets Available for Benefits		
Beginning of year	14,815,536	15,563,187
End of year	$ 15,644,318	$ 14,815,536

The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
Notes to Financial Statements
December 31, 2012

NOTE 1 – PLAN DESCRIPTION

The following description of Lake County Press, Inc. Deferred Compensation Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General

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Contributions

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Vesting

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Benefit Payments

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Party – In - Interest Transactions

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NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review

Subsequent events have been evaluated by management through November 22, 2013, which approximates the date the financial statements were available to be issued.

Basis of Accounting

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Participant Loans-

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Benefit Payments –

Benefits are recorded when paid.

Expenses –

The Company pays substantially all administrative and consulting expenses. Any asset-related fees are paid by the Plan.

Use of Estimates –

The preparation of financial statements in conformity with accounting principals generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

NOTE 3 – INVESTMENTS

The Plan's assets are held by the Trustee of the Plan. Employer and employee contributions are held and managed by the Trustee, which invests cash received, interest and dividend income and makes distributions to participants.

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American Mutual Fund	924,091	907,590
Munder Index 500	939,392	1,053,652
Fidelity U.S. Government Reserves	3,135,382	2,411,370
American Europacific Growth	1,253,526	1,238,488
Calamos Growth Fund	1,111,697	1,118,077
American Growth Fund of America	1,071,317	1,048,217

The Plan categorizes its financial instruments recorded at fair value into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets that the Plan has the ability to assess (Level 1). Investments whose values are based on quoted prices in markets that are not active or model inputs that are observable either directly or indirectly for substantially their full term are designated as Level 2. Investments whose values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement process are designated as Level 3. If the inputs used to measure the financial statements fall within different levels of the hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the instrument. All the Plan's mutual fund investments have been designated Level 1.

NOTE 4 – TAX STATUS

The Plan is a prototype plan. The prototype plan has received a favorable opinion letter from the Internal Revenue Service (IRS) that the prototype plan, as designed, is qualified for federal income tax-exempt status. The Plan has not individually sought its own determination letter. Effective April 6, 2010, the Company adopted an amendment regarding the suspension of the employer-matching contribution. Because filing this amendment with the Internal Revenue Service is optional, the Company chose not to file. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore believes that the Plan is qualified and the related trust is tax-exempt.

The Plan administrator believes that the Plan is no longer subject to income tax examinations for years prior to 2007.

NOTE 5- RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits

NOTE 6- PLAN TERMINATION

While it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in the plan agreement and the Employee Retirement Security Act of 1974 (ERISA).

Lake County Press, Inc.
Deferred Compensation Plan
Schedule of Assets Held at End of Year
Form 5500, Schedule H, Line 4i
EIN 36-2699383, Plan No. 001
December 31, 2012

(a)(b) Identity of Issuer		(c) Description of Investment	(d) Cost	(e) Current Value
Fidelity Investments		Mutual Funds		
		Aberdeen Small Cap Fund Class A	**	$ 116,542
		American Balanced Fund Class A	**	1,907,270
		American Bond Fund of America Class A	**	731,860
		American Europacific Growth Class A	**	1,253,526
		American Growth Fund of America Class A	**	1,071,317
		American Investment Company of America	**	2,257,092
		American Mutual Fund Class A	**	924,091
		Calamos Growth Fund Class A	**	1,111,697
	*	Fidelity Advisor Leverged Co Class A	**	689,740
	*	Fidelity U.S. Government Reserves	**	
		Goldman Sachs High Yield Class A	**	168,457
		Goldman Sachs Strategic Int'l Eq Class A	**	97,943
		Munder Index 500 Class A	**	939,392
		Nuveen Small Cap Class A	**	166,612
		Oppenheimer Int'l Bond Class A	**	163,653
		Perkins Mid-Cap Value Class A	**	241,341
		Prudential Global Real Estate Fund Class A	**	76,208
	*	Fidelity Cash Reserve Fund	**	3,135,382
Participants		Participant loans with interest rates ranging from 3.25 percent to 6.0 percent**	-0-	429,153
				$ 15,481,276

* Fidelity Investments is considered a party in interest

** Cost omitted for participant-directed investments

** Loan repayments are made by participant payroll withholding over a period not to exceed 5 years (20 years for a loan related to the purchase of a principal residence).

LAKE COUNTY PRESS, INC.
Deferred Compensation Plan

ANNUAL FINANCIAL REPORT
DECEMBER 31, 2012

Lake County Press, Inc.
Deferred Compensation Plan

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November 22, 2013

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Lake County Press, Inc.
Deferred Compensation Plan
Waukegan, Illinois 60085

Report on the Financial Statements

We have audited the accompanying financial statements of the Lake County Press, Inc. Deferred Compensation Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2012 and 2011, and the changes in its net assets available for benefits for the year(s) then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets Held at End of Year as of December 31, 2012, is referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Certified Public Accountants

Lake County Press, Inc.
Deferred Compensation Plan
Comparative Statements of Net Assets Available for Benefits
December 31, 2012 and 2011

	2012	2011
Assets		
Cash with financial institution	$ 33,173	$ 1,847
Participants - directed investments		
Mutual funds	$ 15,052,123	$ 14,427,160
Participant loans	577,129	386,529
Total participant-directed investments	$ 15,629,252	$ 14,813,689
Total assets	$ 15,662,425	$ 14,815,536
Liabilities		
Due to participants	$ 18,107	
Net Assets Available for Benefits	$ 15,644,318	$ 14,815,536

The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
Comparative Statements of Changes in Net Assets Available for Benefits
December 31, 2012 and 2011

	2012	2011
Additions to Net Assets		
Contributions- employees	$ 395,850	$ 424,463
Investment income		
Interest on participant loans	$ 13,999	$ 14,412
Mutual fund dividends	201,573	412,493
Net appreciation (depreciation) in fair value of mutual funds	1,704,693	(676,420)
Total investment income (loss)	$ 1,920,265	$ (249,515)
Total additions	$ 2,316,115	$ 174,948
Deductions from Net Assets		
Benefits paid directly to participants or beneficiaries	$ 1,483,110	$ 919,599
Administrative expenses	4,223	3,000
Total deductions	$ 1,487,333	$ 922,599
Net Increase (Decrease)	$ 828,782	$ (747,651)
Net Assets Available for Benefits		
Beginning of year	14,815,536	15,563,187
End of year	$ 15,644,318	$ 14,815,536

The accompanying notes are an integral part of the financial statements.

Lake County Press, Inc.
Deferred Compensation Plan
Notes to Financial Statements
December 31, 2012

NOTE 1 – PLAN DESCRIPTION

The following description of Lake County Press, Inc. Deferred Compensation Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full–time employees of Lake County Press, Inc. (the Company) who have completed 500 hours of service within six months and are age 20 or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

The Plan provides for employee salary 401(k) contributions up to a maximum of 100 percent of their annual compensation subject to maximum tax-deferred limitations established by the Internal Revenue Code. Participants may also make contributions to the Plan in the form of a rollover of funds from another qualified plan.

The Plan provided for employer-matching contributions of 25 percent of the participant's deferred compensation that does not exceed 5 percent of the employee's compensation. On April 6, 2009, the Company adopted an amendment and notified employees that the employer-matching contributions would be suspended. On March 1, 2010, the employer executed a complete restatement of the plan. Effective January 1, 2010 the match was reinstated as a discretionary match, not as a fixed match.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of the Company's contributions and plan earnings and charged with an allocation of administrative expenses. Allocations are based on a participant's compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may direct the investments of their account balances into various investment options offered by the Plan.

Vesting

Participant contribution and the employer-match contribution and related earnings are fully vested at all times and are not subject to forfeiture for any reason.

Participant Loans

Participants may borrow from their accounts a minimum of $1,000 up to a maximum of 50 percent of their account balance, not to exceed $50,000. Loans are collateralized by the participant's account balance and bear interest at a market rate and are payable through participant payroll withholdings under a reasonable repayment schedule of not more than 20 years for loans related to the purchase of a principal residence and five years for other loans. Principal and interest is paid ratably through payroll deductions.

Benefit Payments

Distributions are payable upon attainment of age 59 ½, retirement, death, disability or termination of employment in the form of a lump-sum amount equal to the vested balance of a participant's account.

Hardship Withdrawals

Participants may request that all or a portion of their account be distributed in the case of severe financial hardship, as defined in the plan document. The Company must approve any such hardship withdrawals.

Party – In - Interest Transactions

Certain plan assets were in investment funds managed by Fidelity Investments. Fidelity Investments was the custodian of the Plan; therefore, these transactions qualify as party-in-interest transactions as defined under ERISA guidelines. In September, 2012, Verisight Trust became the custodian of the funds

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review

Subsequent events have been evaluated by management through November 22, 2013, which approximates the date the financial statements were available to be issued.

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting. Investment contracts held by a defined contribution plan are required to be reported at fair value.

Participant Loans-

Participant loans are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are recorded in the recorded loan balances based on the terms of the Plan document.

Investment Valuation –

The Plan's investments in mutual funds are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Net appreciation includes the plan's gains and loss on investments bought and sold as well as held during the year.

Benefit Payments –

Benefits are recorded when paid.

Expenses –

The Company pays substantially all administrative and consulting expenses. Any asset-related fees are paid by the Plan.

Use of Estimates –

The preparation of financial statements in conformity with accounting principals generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

NOTE 3 – INVESTMENTS

The Plan's assets are held by the Trustee of the Plan. Employer and employee contributions are held and managed by the Trustee, which invests cash received, interest and dividend income and makes distributions to participants.

During the year 2012, the Plan's investments in registered investment companies appreciated by $1,704,693. This appreciation is reported in investment income.

The following presents investments that represent 5% or more of the Plan's net assets available for benefits.

	2012	2011
Fidelity Investments		
American Balanced Funds	$1,907,270	$ 2,143,853
American Investment Company of America	2,257,092	2,140,200
American Mutual Fund	924,091	907,590
Munder Index 500	939,392	1,053,652
Fidelity U.S. Government Reserves	3,135,382	2,411,370
American Europacific Growth	1,253,526	1,238,488
Calamos Growth Fund	1,111,697	1,118,077
American Growth Fund of America	1,071,317	1,048,217

The Plan categorizes its financial instruments recorded at fair value into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets that the Plan has the ability to assess (Level 1). Investments whose values are based on quoted prices in markets that are not active or model inputs that are observable either directly or indirectly for substantially their full term are designated as Level 2. Investments whose values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement process are designated as Level 3. If the inputs used to measure the financial statements fall within different levels of the hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the instrument. All the Plan's mutual fund investments have been designated Level 1.

NOTE 4 – TAX STATUS

The Plan is a prototype plan. The prototype plan has received a favorable opinion letter from the Internal Revenue Service (IRS) that the prototype plan, as designed, is qualified for federal income tax-exempt status. The Plan has not individually sought its own determination letter. Effective April 6, 2010, the Company adopted an amendment regarding the suspension of the employer-matching contribution. Because filing this amendment with the Internal Revenue Service is optional, the Company chose not to file. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore believes that the Plan is qualified and the related trust is tax-exempt.

The Plan administrator believes that the Plan is no longer subject to income tax examinations for years prior to 2007.

NOTE 5- RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits

NOTE 6- PLAN TERMINATION

While it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in the plan agreement and the Employee Retirement Security Act of 1974 (ERISA).

Lake County Press, Inc.
Deferred Compensation Plan
Schedule of Assets Held at End of Year
Form 5500, Schedule H, Line 4i
EIN 36-2699383, Plan No. 001
December 31, 2012

(a)(b) Identity of Issuer		(c) Description of Investment	(d) Cost	(e) Current Value
Fidelity Investments		Mutual Funds		
		Aberdeen Small Cap Fund Class A	**	$ 116,542
		American Balanced Fund Class A	**	1,907,270
		American Bond Fund of America Class A	**	731,860
		American Europacific Growth Class A	**	1,253,526
		American Growth Fund of America Class A	**	1,071,317
		American Investment Company of America	**	2,257,092
		American Mutual Fund Class A	**	924,091
		Calamos Growth Fund Class A	**	1,111,697
	*	Fidelity Advisor Leverged Co Class A	**	689,740
	*	Fidelity U.S. Government Reserves	**	
		Goldman Sachs High Yield Class A	**	168,457
		Goldman Sachs Strategic Int'l Eq Class A	**	97,943
		Munder Index 500 Class A	**	939,392
		Nuveen Small Cap Class A	**	166,612
		Oppenheimer Int'l Bond Class A	**	163,653
		Perkins Mid-Cap Value Class A	**	241,341
		Prudential Global Real Estate Fund Class A	**	76,208
	*	Fidelity Cash Reserve Fund	**	3,135,382
Participants		Participant loans with interest rates ranging from 3.25 percent to 6.0 percent**	-0-	429,153
				$ 15,481,276

* Fidelity Investments is considered a party in interest

** Cost omitted for participant-directed investments

** Loan repayments are made by participant payroll withholding over a period not to exceed 5 years (20 years for a loan related to the purchase of a principal residence).

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A This return/report is for: ☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____

B This return/report is: ☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. ▶ ☐

D Check box if filing under: ☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan LAKE COUNTY PRESS, INC.
DEFERRED COMPENSATION PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 09/01/1986

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)
LAKE COUNTY PRESS, INC.

98 NOLL STREET

WAUKEGAN IL 60085

2b Employer Identification Number (EIN) 36-2699383

2c Sponsor's telephone number (847) 336-4333

2d Business code (see instructions) 323100

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Robert J. Hilliard	12-2-13	ROBERT HILLIARD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Robert J. Hilliard	12-2-13	ROBERT HILLIARD
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	188
6 Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a Active participants	**6a**	149
b Retired or separated participants receiving benefits	**6b**	3
c Other retired or separated participants entitled to future benefits	**6c**	24
d Subtotal. Add lines **6a**, **6b**, and **6c**.	**6d**	176
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	176
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	138
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2G 2J 2K 2F 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	☐ Insurance	(1)	☐ Insurance
(2)	☐ Code section 412(e)(3) insurance contracts	(2)	☐ Code section 412(e)(3) insurance contracts
(3)	☒ Trust	(3)	☒ Trust
(4)	☐ General assets of the sponsor	(4)	☐ General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules		**b General Schedules**	
(1)	☒ **R** (Retirement Plan Information)	(1)	☒ **H** (Financial Information)
(2)	☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2)	☐ **I** (Financial Information – Small Plan)
		(3)	☐ **A** (Insurance Information)
		(4)	☒ **C** (Service Provider Information)
(3)	☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5)	☐ **D** (DFE/Participating Plan Information)
		(6)	☐ **G** (Financial Transaction Schedules)

LAKE COUNTY PRESS, INC.
Deferred Compensation Plan

ANNUAL FINANCIAL REPORT
DECEMBER 31, 2012

Lake County Press, Inc.
Deferred Compensation Plan

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We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2012 and 2011, and the changes in its net assets available for benefits for the year(s) then ended in accordance with accounting principles generally accepted in the United States of America.

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American Mutual Fund	924,091	907,590
Munder Index 500	939,392	1,053,652
Fidelity U.S. Government Reserves	3,135,382	2,411,370
American Europacific Growth	1,253,526	1,238,488
Calamos Growth Fund	1,111,697	1,118,077
American Growth Fund of America	1,071,317	1,048,217

The Plan categorizes its financial instruments recorded at fair value into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets that the Plan has the ability to assess (Level 1). Investments whose values are based on quoted prices in markets that are not active or model inputs that are observable either directly or indirectly for substantially their full term are designated as Level 2. Investments whose values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement process are designated as Level 3. If the inputs used to measure the financial statements fall within different levels of the hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the instrument. All the Plan's mutual fund investments have been designated Level 1.

NOTE 4 – TAX STATUS

The Plan is a prototype plan. The prototype plan has received a favorable opinion letter from the Internal Revenue Service (IRS) that the prototype plan, as designed, is qualified for federal income tax-exempt status. The Plan has not individually sought its own determination letter. Effective April 6, 2010, the Company adopted an amendment regarding the suspension of the employer-matching contribution. Because filing this amendment with the Internal Revenue Service is optional, the Company chose not to file. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore believes that the Plan is qualified and the related trust is tax-exempt.

The Plan administrator believes that the Plan is no longer subject to income tax examinations for years prior to 2007.

NOTE 5- RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits

NOTE 6- PLAN TERMINATION

While it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in the plan agreement and the Employee Retirement Security Act of 1974 (ERISA).

Lake County Press, Inc.
Deferred Compensation Plan
Schedule of Assets Held at End of Year
Form 5500, Schedule H, Line 4i
EIN 36-2699383, Plan No. 001
December 31, 2012

(a)(b) Identity of Issuer		(c) Description of Investment	(d) Cost	(e) Current Value
Fidelity Investments		Mutual Funds		
		Aberdeen Small Cap Fund Class A	**	$ 116,542
		American Balanced Fund Class A	**	1,907,270
		American Bond Fund of America Class A	**	731,860
		American Europacific Growth Class A	**	1,253,526
		American Growth Fund of America Class A	**	1,071,317
		American Investment Company of America	**	2,257,092
		American Mutual Fund Class A	**	924,091
		Calamos Growth Fund Class A	**	1,111,697
	*	Fidelity Advisor Leverged Co Class A	**	689,740
	*	Fidelity U.S. Government Reserves	**	
		Goldman Sachs High Yield Class A	**	168,457
		Goldman Sachs Strategic Int'l Eq Class A	**	97,943
		Munder Index 500 Class A	**	939,392
		Nuveen Small Cap Class A	**	166,612
		Oppenheimer Int'l Bond Class A	**	163,653
		Perkins Mid-Cap Value Class A	**	241,341
		Prudential Global Real Estate Fund Class A	**	76,208
	*	Fidelity Cash Reserve Fund	**	3,135,382
Participants		Participant loans with interest rates ranging from 3.25 percent to 6.0 percent**	-0-	429,153
				$ 15,481,276

* Fidelity Investments is considered a party in interest

** Cost omitted for participant-directed investments

** Loan repayments are made by participant payroll withholding over a period not to exceed 5 years (20 years for a loan related to the purchase of a principal residence).