

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 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 2019 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information		
For calendar plan year 2019 or fiscal plan year beginning <u>01/01/2019</u> and ending <u>12/31/2019</u>			
A	This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)	
	☒ 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 ☐ special extension (enter description)	☐ the DFVC program

Part II	Basic Plan Information —enter all requested information		
1a	Name of plan <u>RR DONNELLEY SAVINGS PLAN</u>	1b	Three-digit plan number (PN) ▶ <u>003</u>
		1c	Effective date of plan <u>01/01/1978</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>R.R. DONNELLEY & SONS COMPANY</u> <u>35 W WACKER DR</u> <u>CHICAGO, IL 60601</u>	2b	Employer Identification Number (EIN) <u>36-1004130</u>
		2c	Plan Sponsor's telephone number <u>312-326-8000</u>
		2d	Business code (see instructions) <u>323100</u>

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.	10/13/2020	CHRISTY L. GOLDBERG-HIRSCH
	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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2019)
v. 190130

3a Plan administrator's name and address ☐ Same as Plan Sponsor BENEFITS COMMITTEE BENEFITS COMMITTEE 35 W. WACKER DRIVE CHICAGO, IL 60601	3b Administrator's EIN 20-1730106 3c Administrator's telephone number 312-326-8000
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 19557
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 16180 6a(2) 15940 6b 333 6c 3463 6d 19736 6e 54 6f 19790 6g 17349 6h 1
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 2F 2G 2J 2K 2R 2S 2T 3F 3H 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) ☒ 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) ☒ 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) ☒ 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) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2019 Form M-1 annual report. If the plan was not required to file the 2019 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information 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.	OMB No. 1210-0110
		2019
		This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan RR DONNELLEY SAVINGS PLAN	B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 R.R. DONNELLEY & SONS COMPANY	D Employer Identification Number (EIN) 36-1004130

Part I	Service Provider Information (see instructions)
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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)..... ☒ 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
GREAT-WEST LIFE & ANNUITY INSURANCE
84-0467907

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
NORTHERN TRUST CORPORATION
36-2723087

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
NORTHERN TRUST INVESTMENTS, INC.
36-3608252

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
GALLIARD CAPITAL MANAGEMENT, INC
41-1813702

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

GWFS EQUITIES, INC.

84-0965407

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

ALLIANCEBERNSTEIN, L.P.

13-4064930

(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

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(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)

GREAT-WEST LIFE & ANNUITY INSURANCE

84-0467907

(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 50 64	NONE	590302	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ADVISED ASSETS GROUP, LLC

84-1532243

(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?
26 50	NONE	502557	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FRONTIER CAPITAL MANAGEMENT COMPANY

04-3492668

(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?
27 28	NONE	98263	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)

AJO, LP

23-2312104

(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?
28	NONE	90654	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
(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
(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

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 D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information 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.	OMB No. 1210-0110 2019 This Form is Open to Public Inspection.
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan <u>RR DONNELLEY SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>003</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>R.R. DONNELLEY & SONS COMPANY</u>	D Employer Identification Number (EIN) <u>36-1004130</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE AGGREGATE BOND INDEX</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST INVESTMENTS, INC</u>		
c EIN-PN <u>45-6138589-088</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>91081496</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE EXTENDED EQ MKT INDEX</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST INVESTMENTS, INC</u>		
c EIN-PN <u>45-6138589-110</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>29785694</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE S&P 500 INDEX FD</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST INVESTMENTS, INC</u>		
c EIN-PN <u>45-6138589-002</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE TIPS INDEX FUND</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST INVESTMENTS, INC</u>		
c EIN-PN <u>45-6138589-091</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE SHORT TERM INV</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST INVESTMENTS, INC</u>		
c EIN-PN <u>45-6138589-084</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE ACWI EX-US MARKET FD</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST INVESTMENTS, INC</u>		
c EIN-PN <u>45-6138589-223</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LOOMIS SAYLES CORE PLUS FIX INCOME</u>		
b Name of sponsor of entity listed in (a): <u>LOOMIS SAYLES TRUST COMPANY</u>		
c EIN-PN <u>84-6391546-010</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO FIXED INCOME FUND A		
b Name of sponsor of entity listed in (a): WELLS FARGO TRUST COMPANY		
c EIN-PN 52-2250963-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 34924153
a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO FIXED INCOME FUND F		
b Name of sponsor of entity listed in (a): WELLS FARGO TRUST COMPANY		
c EIN-PN 52-2252204-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 41559168
a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO FIXED INCOME FUND L		
b Name of sponsor of entity listed in (a): WELLS FARGO TRUST COMPANY		
c EIN-PN 27-6635237-276	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29852367
a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO SHORT TERM INV - S		
b Name of sponsor of entity listed in (a): WELLS FARGO TRUST COMPANY		
c EIN-PN 41-6292499-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4572998
a Name of MTIA, CCT, PSA, or 103-12 IE: ALLIANCE BERNSTEIN EMERGING MARKETS		
b Name of sponsor of entity listed in (a): ALLIANCE BERNSTEIN LP		
c EIN-PN 04-6948485-038	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: ARROWSTREET INTERNATIONAL EQ EAFE C		
b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY		
c EIN-PN 30-6507806-003	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE 1-10 TIPS		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC		
c EIN-PN 45-6138589-143	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5993689
a Name of MTIA, CCT, PSA, or 103-12 IE: US SHORT TERM GOVT/CREDIT BOND INDX		
b Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS		
c EIN-PN 90-0337987-230	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5981781
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE LONG TERM GOVT BD		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC		
c EIN-PN 45-6138589-060	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49213641
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE S&P 500 INDEX		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC		
c EIN-PN 45-6138589-003	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 291317355

a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE ALL COUNTRY WORLD

b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC

c EIN-PN 45-6138589-128	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 136911254
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a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE SHORT TERM INV

b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC

c EIN-PN 45-6138589-223	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6041565
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2019 This Form is Open to Public Inspection
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan RR DONNELLEY SAVINGS PLAN	B Three-digit plan number (PN) ►	003
C Plan sponsor's name as shown on line 2a of Form 5500 R.R. DONNELLEY & SONS COMPANY	D Employer Identification Number (EIN) 36-1004130	

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	0
(2) Participant contributions.....	1b(2)	12	2608
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	1257276	555204
(2) U.S. Government securities	1c(2)	30099293	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other.....	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common.....	1c(4)(B)	212512856	238051096
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property).....	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans.....	1c(8)	16564648	16246001
(9) Value of interest in common/collective trusts	1c(9)	670819932	727235161
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities.....	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	131573961	224091005
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	39118250	51088358

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	1101946228	1257269433

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	481399
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	1033317	266386
k Total liabilities (add all amounts in lines 1g through 1j)	1k	1033317	747785

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	1100912911	1256521648
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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)	0	
(B) Participants	2a(1)(B)	53452071	
(C) Others (including rollovers)	2a(1)(C)	3254583	
(2) Noncash contributions	2a(2)	0	56706654
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	-1418	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	907353	
(E) Participant loans	2b(1)(E)	920658	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1826593
(2) Dividends: (A) Preferred stock	2b(2)(A)	667	
(B) Common stock	2b(2)(B)	2916688	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	5017989	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		7935344
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	396078577	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	359094155	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		36984422
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	26329990	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		26329990

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		122285677
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		26592361
c Other income	2c		2684328
d Total income. Add all income amounts in column (b) and enter total	2d		281345369

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	122463210	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		122463210
f Corrective distributions (see instructions)	2f		223805
g Certain deemed distributions of participant loans (see instructions)	2g		381112
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	41700	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	1816242	
(4) Other	2i(4)	810563	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		2668505
j Total expenses. Add all expense amounts in column (b) and enter total	2j		125736632

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		155608737
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) ☐ Unmodified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: **BAKER TILLY VIRCHOW KRAUSE, LLP**

(2) EIN: **39-0859910**

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:

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.)

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.)

	Yes	No	Amount
4a		X	
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?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?		X	
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?		X	
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.)	X		
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.)		X	
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
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? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____. (See instructions.)

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2019</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan RR DONNELLEY SAVINGS PLAN		B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 R.R. DONNELLEY & SONS COMPANY		D Employer Identification Number (EIN) 36-1004130
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 0
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): 84-1455663		
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 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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2019 v. 190130		

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

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

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

16a**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): _____

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

- a** Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

- b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

RR DONNELLEY SAVINGS PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

Including Independent Auditors' Report

December 31, 2019 and 2018

RR Donnelley Savings Plan

December 31, 2019 and 2018

Index

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Note: All other schedules required by Section 2520.103-10 of the Department Of Labor's rules and regulations for reporting and disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable to the RR Donnelley Savings Plan.

INDEPENDENT AUDITORS' REPORT

To the Participants and Plan Administrator of
RR Donnelley Savings Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of RR Donnelley Savings Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, and the related statement of changes in net assets available for benefits for the year ended December 31, 2019, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 9, which was certified by The Northern Trust Company, the trustee of the Plan ("Trustee"), except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the Trustee as of December 31, 2019 and 2018, and for the year ended December 31, 2019, that the information provided to the Plan administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the accompanying financial statements. Accordingly, we do not express an opinion on these financial statements.

Other Matters- Report on the Supplementary Information

The supplemental schedule of Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

Report on Form and Content in Compliance with DOL's Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Baker Tilly US, LLP

Baker Tilly US, LLP (formerly known as Baker Tilly Virchow Krause, LLP)
Chicago, Illinois
September 29, 2020

RR DONNELLEY SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2019 AND 2018
(EMPLOYER IDENTIFICATION NUMBER 36-1004130, PLAN NUMBER 003)

	<u>2019</u>	<u>2018</u>
ASSETS		
Plan investments, at fair value	\$ 1,129,913,501	\$ 904,242,706
Plan investments, at contract value	108,847,246	183,439,347
Receivables:		
Participant contributions	2,608	12
Notes receivable from participants	<u>17,692,381</u>	<u>17,876,157</u>
Total receivables	<u>17,694,989</u>	<u>17,876,169</u>
Total assets	1,256,455,736	1,105,558,222
LIABILITIES		
Accrued expenses and other liabilities	481,399	557,065
Excess contributions payable	<u>266,386</u>	<u>476,252</u>
Total liabilities	<u>747,785</u>	<u>1,033,317</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 1,255,707,951</u></u>	<u><u>\$ 1,104,524,905</u></u>

RR DONNELLEY SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2019
(EMPLOYER IDENTIFICATION NUMBER 36-1004130, PLAN NUMBER 003)

ADDITIONS TO NET ASSETS:

Investment income	
Dividend and interest income	\$ 8,740,097
Net appreciation in fair value of investments	208,881,156
Total investment income	217,621,253
Interest income on notes receivable from participants	963,082
Contributions	
Participants	53,452,071
Rollovers	3,254,583
Total contributions	56,706,654
Total additions	275,290,989

DEDUCTIONS FROM NET ASSETS:

Benefits paid to participants	122,975,680
Administrative expenses	1,132,263
Total deductions	124,107,943
Net increase	151,183,046

NET ASSETS, BEGINNING OF YEAR	1,104,524,905
NET ASSETS, END OF YEAR	\$ 1,255,707,951

RR DONNELLEY SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 and 2018

NOTE 1 – PLAN DESCRIPTION

The following description of the RR Donnelley Savings Plan (the “Plan”) is provided for general information purposes only and covers current Plan provisions, except as specifically noted otherwise. For more complete information, refer to the Summary Plan Description and the Plan document, including any modifications and amendments thereto. The Plan is a defined contribution plan sponsored by R. R. Donnelley & Sons Company (the “Company”) designed to allow eligible employees to save for retirement on a tax-advantaged basis. The Plan is intended to qualify as a cash or deferred arrangement under Section 401(k) of the Internal Revenue Code of 1986, as amended (the “Code”), and is subject to the Employee Retirement Income Security Act of 1974, as amended (“ERISA”).

Administration

The Plan is administered by the Plan’s Benefits Committee and its delegates. The Plan’s assets are held in the RR Donnelley Savings Plan Trust (the “Trust”). The Northern Trust Company (“Trustee”) serves as the trustee of the Trust and custodian of the Plan’s assets. Great West Financial, operating under the brand name Empower Retirement, is the Plan’s recordkeeper.

Eligibility

With certain limited exceptions, all employees of the Company and its U.S. subsidiaries are eligible to become Plan members (“participants”). Elections to participate in the Plan are effective as soon as administratively practicable. The Plan has automatic enrollment provisions pursuant to which eligible employees are automatically enrolled 30 days after being hired, in each case unless the employee opts out of automatic enrollment or elects to be enrolled earlier. Individuals who are automatically enrolled make contributions on a before-tax basis equal to 3% of eligible compensation.

Contributions

Eligible employees may elect to make before-tax, after-tax and Roth 401(k) contributions under the Plan. Subject to certain limitations, the contribution election percentages allowed are from 1%-85% of eligible compensation for before-tax, after-tax and Roth 401(k) contributions, and the total of all elections cannot exceed 85% of eligible compensation. Before-tax and Roth 401(k) contributions are also limited by governmental regulations. Participants who have attained age 50 by the end of the Plan year are eligible to make catch-up contributions and thereby exceed certain governmental limits that would otherwise apply. Participants can change contribution elections at any time.

The Plan permits the Company to provide discretionary matching contributions. The Company did not make any discretionary matching contributions for the 2019 Plan year. Furthermore, from time to time, the Company makes matching contributions in connection with a corporate transaction, such as an acquisition. These matching contributions are generally made for only a limited time period.

Employees may also roll over amounts to the Plan that were distributed from certain types of retirement plans and accounts.

Participant Accounts

Each participant’s account is credited with the participant’s contributions and the Company’s contributions, if any, and allocations of Plan earnings. Participant accounts are charged with an allocation of general administrative expenses and with participant specific transaction charges. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Vesting and Forfeited Accounts

Generally, participants are 100% vested in their accounts, except that employer contributions, such as matching contributions, (and earnings thereon) were generally subject to a three-year cliff vesting schedule, although the vesting schedule may have varied with respect to matching contributions made in connection with a corporate transaction. Effective January 1, 2018, eligible participants became 100% vested in their matching contributions.

At December 31, 2019 and 2018, forfeited non-vested accounts totaled \$20 and \$18, respectively. These accounts will be used to reduce future employer contributions or administrative expenses. During 2019, no forfeitures were used to reduce employer contributions or administrative expenses.

RR DONNELLEY SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2019 and 2018

Notes Receivable from Participants

Subject to statutory and regulatory requirements and Plan rules, participants are generally permitted to borrow up to 50% of certain portions of their vested account balance. The minimum loan amount is \$1,000. The loans bear interest at a rate equal to 1% over the prime rate on the first business day of the month in which the loan is initiated, as published in the Wall Street Journal. Principal and interest is paid through payroll deductions.

Benefit Payments and Withdrawals

A participant's account balance may be distributed in various forms and at various times depending on multiple factors, including the participant's employment status, the participant's age, the participant's financial need, the participant's uniformed services status, the classification of the contributions to the participant's account and the type of investments held in the participant's account.

Distributions can be taken as one or more lump sums or as periodic installments. Additionally, in certain situations, brokerage account assets may be distributed in-kind.

Investment Options

Participants are permitted to direct how their account balance under the Plan is invested. Subject to certain restrictions, participants can change investment elections on a daily basis. As of December 31, 2019 and 2018, the following investment options were offered under the Plan:

Core Investment Funds— investment funds that invest in different asset classes, such as fixed income, bonds, stocks, and alternative investments.

Target Date Funds— mix of investments in core investment funds that automatically reduce their level of equity risk over time and target retirement at age 65.

Conservative Income Fund— a conservative portfolio comprised of a mix of investments in core investment funds with equity risk maintained lower than any Target Date Fund.

Self-Directed Brokerage Accounts— participants may invest a portion of their account balance under the Plan in investment options not otherwise offered under the Plan, such as certain mutual funds, stocks, or bonds, by directing such portion of their account balance to be invested through a self-directed brokerage account under the Plan.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("US GAAP"). The accounts of the Plan are maintained on the accrual basis of accounting. Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Use of Estimates

The preparation of financial statements in conformity with US GAAP requires the Plan Administrator to make estimates and assumptions that affect (i) the reported amounts of assets, liabilities and changes therein, and (ii) disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset, or paid to transfer a liability, in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements, including details on inputs, valuation techniques and the fair value levels within the fair value hierarchy.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation or depreciation of investments included in the accompanying Statement of Changes in Net Assets available for Benefits includes realized gains or losses from the sale of investments during the year, the change in

RR DONNELLEY SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2019 and 2018

Investment Valuation and Income Recognition (cont.)

unrealized appreciation or depreciation in the fair value of investments held during the year and any investment related expenses, such as investment manager fees.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. No allowance for credit losses has been recorded as of December 31, 2019 and 2018. Fees related to the administration of notes receivable from participants are included in the principal amount borrowed and are charged directly to a participant by reducing the amount of principal disbursed to the participant at loan origination.

Plan Distributions

Benefit payments to participants are recorded upon distribution. The Trustee uses a distribution account to make all benefit payments. Amounts are transferred from the participant's investment fund(s) to this account as directed by the Plan administrator.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless paid by the Company. Expenses paid by the Company include audit fees, legal fees, and some other administrative fees and are excluded from these financial statements. Administrative expenses paid by the Plan include recordkeeping fees, investment consulting fees, custody fees, and most other administrative fees. Investment related expenses paid by the Plan, such as investment management fees are included in net appreciation/(depreciation) in fair value of investments.

Risks and Uncertainties

The Plan provides various options for investing in securities. Investment securities are exposed to various risks, such as interest rate, market and credit risk. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statement of Changes in Net Assets Available for Benefits.

Recent Accounting Standards

In July 2018, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") No. 2018-09, *Codification Improvements*. ASU No. 2018-09 amended subtopic 962-325 and removes the stable value common collective fund ("CCT") from the illustration example in paragraph 962-325-55-17 to avoid the interpretation that such an investment would never have a readily determinable fair value and, therefore, would always use the net asset value per share as practical expedient. Rather, a plan should evaluate whether a readily determinable fair value exists to determine whether those investments may qualify for the practical expedient to measure net asset value in accordance with Topic 820. ASU No. 2018-09 is effective for fiscal years beginning after December 15, 2019. An entity shall apply the amendments prospectively. Early adoption is permitted. The Administrator has determined that no changes are required to the fair value hierarchy for 2019.

In August 2018, the FASB issued ASU No. 2018-13, *Disclosure Framework – Changes to the Disclosure Requirements for Fair Value Measurement*. ASU 2018-13 modifies the disclosure requirements for fair value measurements in Topic 820, Fair Value Measurement. The amendments are based on the concepts in the FASB Concepts Statement, *Conceptual Framework for Financial Reporting – Chapter 8: Notes to Financial Statements*, which the Board finalized on August 28, 2018. ASU No. 2018-13 is effective for fiscal years beginning after December 15, 2019. Early adoption is permitted. The Administrator is currently assessing the impact that ASU No. 2018-13 will have on the Plan's financial statements.

NOTE 3 – GALLIARD STABLE VALUE FUND

The Plan assets include benefit-responsive investment contracts via investment in the Galliard Stable Value Fund ("the Fund"), an investment option of the Plan. The Fund is solely owned by the Plan and therefore the Plan owns the Fund's underlying contracts and investments.

The Fund primarily invests in security-backed contracts issued by insurance companies and other financial institutions. A security-backed contract is an investment contract issued by an insurance company or other financial institution, backed by a portfolio of bonds or units of a collective fund that are owned by the Fund. The portfolio underlying the contract is maintained separately from the

RR DONNELLEY SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2019 and 2018

NOTE 3 – GALLIARD STABLE VALUE FUND (CONT.)

contract issuer's general assets, usually by a third party custodian. These contracts typically allow for realized and unrealized gains and losses on the underlying assets to be amortized, usually over the duration of the underlying investments, through adjustment to the future interest crediting rate, rather than reflected immediately in the net assets of the Fund. The security-backed contracts are designed to reset their respective crediting rates on a quarterly basis and cannot credit an interest rate that is less than 0%. The issuer guarantees that all qualified participant withdrawals will be at contract value.

The Fund's investments are reported at contract value, except for a short-term investment collective trust fund used for liquidity, which is at fair value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate a permitted transaction under the terms of the Plan and the contract. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals, and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Risks arise when entering into any investment contract due to the potential inability of the issuer to meet the terms of the contract. In addition, security-backed contracts have the risk of default or the lack of liquidity of the underlying portfolio assets. The credit risk of each issuer is evaluated and monitored through Galliard's credit analysis, and the underlying portfolio assets are rated investment grade at the time of purchase.

The primary variables impacting the future crediting rates of security-backed contracts include:

- The current yield of the assets underlying the contract;
- The duration of the assets underlying the contract; and
- The existing difference between the fair value and contract value of the assets within the contract.

The crediting rate of security-backed contracts will track current market yields on a trailing basis. The rate reset allows the contract value to converge with the fair value of the underlying portfolio over time, assuming the portfolio continues to earn the current yield for a period of time equal to the current portfolio duration.

Security-backed contracts generally provide for withdrawals associated with certain events which are not in the ordinary course of Fund operations and are paid with a market value adjustment. Events that may trigger a market value adjustment can include the following:

- Material amendments to the Fund's structure or administration;
- Changes to the participating plans' competing investment options including the elimination of equity wash provisions;
- Complete or partial termination of the Fund, including merger with another fund;
- The failure of the Fund to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA;
- The redemption of all or a portion of the interests in the Fund held by a participating plan including withdrawals due to the removal of a specifically identifiable group of employees from coverage under the participating plan, the closing or sale of a subsidiary, employing unit, or affiliate, the bankruptcy or insolvency of a plan sponsor, the merger of the plan with another plan, or the plan sponsor's establishment of another tax qualified defined contribution plan;
- Any change in law, regulation, ruling, administrative or judicial position, or accounting requirement, applicable to the Funds or participating plans; and
- The delivery of any communication to plan participants designed to influence a participant not to invest in the Fund.

At this time, the Fund does not believe that the occurrence of any such market value event, which would limit the Fund's ability to transact at contract value with participants, is probable. Participants may redeem their shares at any time at contract value. However, there is a 90 day equity wash restriction for transfers from the Stable Value Fund to the brokerage option.

RR DONNELLEY SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2019 and 2018

NOTE 4 – FAIR VALUE MEASUREMENTS

Various inputs are used in determining the fair value of the Plan's investments. These inputs are categorized in the three tier value hierarchy, which prioritizes valuation methodology based on the reliability of inputs, as listed below:

Level 1 – Valuations based on quoted prices for identical assets and liabilities in active markets.

Level 2 – Valuations based on observable inputs other than quoted prices included in Level 1, such as quoted prices for similar assets and liabilities in active markets, quoted prices for identical or similar assets and liabilities in markets that are not active, or other inputs that are observable or can be corroborated by observable market data.

Level 3 – Valuations based on unobservable inputs reflecting the Plan's own assumptions, consistent with reasonably available assumptions made by other market participants.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of the input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description by major asset categories of the valuation methodologies and levels used for determining fair value. There have been no changes in the methodology used at December 31, 2019 and 2018.

Cash – Carrying value approximates fair value. Cash is classified as Level 1.

Equity securities – The values of individual equity securities, primarily common stock and exchange traded real estate investment trusts, are based on quoted prices in active markets. As such, these assets are classified as Level 1.

Collective trust funds – The fair values of participation units held in collective trusts are based on the net asset value ("NAV") reported by the fund managers as of the financial statement dates and recent transaction prices, but are not quoted on active markets. The NAV is used as a practical expedient. Each collective trust provides for daily redemptions by the Plan at reported NAVs per share, with no advance notice requirement.

Registered investment companies – Valued at the daily closing price as reported by the fund. Investments held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded (Level 1 measurements).

Self-directed brokerage accounts – The individually managed self-directed brokerage accounts are also classified as Level 1 since the underlying investments are actively traded on a market or exchange.

The valuation methodologies described above may generate a fair value calculation that may not be indicative of net realizable value or future fair values. While the Plan believes the valuation methodologies used are appropriate, the use of different methodologies or assumptions in calculating fair value could result in different amounts. The Plan invests in various assets the valuation of which is determined by NAV. The Plan believes that the NAV is representative of fair value at the reporting date, as there are no significant restrictions on redemption of these investments or other reasons to indicate that the investment would be redeemed at an amount different than the NAV. The fair values of the Plan's investments within the fair value hierarchy as of December 31, 2019 and 2018 were as follows:

RR DONNELLEY SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2019 and 2018

NOTE 4 – FAIR VALUE MEASUREMENTS (CONT.)

Investment Category	Level 1	Level 2	Level 3	Total as of December 31, 2019
Cash	\$ 555,204	\$ -	\$ -	\$ 555,204
Equity securities	249,705,848	-	-	249,705,848
Registered investment companies	224,091,005	-	-	224,091,005
Self-directed brokerage accounts	39,433,606	-	-	39,433,606
Subtotal	513,785,663	-	-	513,785,663
<i>Investments measured at NAV*:</i>				
Collective trust funds				616,127,838
Total investments at NAV				616,127,838
Total				<u>\$ 1,129,913,501</u>

Investment Category	Level 1	Level 2	Level 3	Total as of December 31, 2018
Cash	\$ 1,250,975	\$ -	\$ -	\$ 1,250,975
Equity securities	215,977,551	-	-	215,977,551
Registered investment companies	131,573,961	-	-	131,573,961
Self-directed brokerage accounts	35,653,555	-	-	35,653,555
Subtotal	384,456,042	-	-	384,456,042
<i>Investments measured at NAV*:</i>				
Collective trust funds				519,786,664
Total investments at NAV				519,786,664
Total				<u>\$ 904,242,706</u>

* In accordance with U.S. GAAP, certain investments that are measured at NAV per share (or its equivalent) as a practical expedient are not classified in the fair value hierarchy as of December 31, 2019 and 2018. The fair value amounts presented in this table for such investments are intended to permit reconciliation of the fair value hierarchy to the investments at fair value presented in the statements of net assets available for benefits.

NOTE 5 – TAX STATUS OF THE PLAN

The Plan obtained its latest determination letter on September 30, 2016, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Code, including Sections 401(a) and 401(k) of the Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator, having consulted with the Plan's counsel, believes that the Plan remains tax-exempt as of the financial statement date.

RR DONNELLEY SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2019 and 2018

NOTE 5 – TAX STATUS OF THE PLAN (CONT.)

US GAAP requires the Plan Administrator to evaluate tax positions taken by the Plan. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2019 and 2018, there are no uncertain positions taken or expected to be taken. The Plan has not recognized interest or penalties related to uncertain tax positions. As of December 31, 2018, the Plan was under audit by the IRS for the 2015 plan year. The audit closed July 29, 2019 and the Plan no longer has any audits in progress.

NOTE 6 – PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan at any time subject to the provisions of ERISA. In the event of Plan termination, the rights of the participants in their account balances will, to the extent not already vested, become 100% vested.

NOTE 7 – RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Certain plan investments are managed by the Trustee. Fees paid by the Plan to the Trustee for investment management services are party-in-interest transactions for which there is an exemption from the prohibited transactions rules of ERISA. The Plan reimburses the Company for certain employees' compensation and related benefit costs related to the administration of the Plan and such reimbursements constitute a party-in-interest transaction for which there is an exemption. In addition, notes receivable from participants constitute a party-in-interest transaction for which there is an exemption.

NOTE 8 – INFORMATION CERTIFIED BY THE TRUSTEE

The Plan administrator has elected the method of annual reporting permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Trustee has certified that the following data included in the accompanying financial statements is complete and accurate:

- Plan investments and notes receivable from participants as shown in the statements of net assets available for plan benefits as of December 31, 2019 and 2018
- Investment loss and interest income on notes receivable from participants as shown in the statement of changes in net assets available for plan benefits for the year ended December 31, 2019
- Supplemental Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2019

The Plan's independent accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedule.

RR DONNELLEY SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2019 and 2018

NOTE 9 – RECONCILIATION TO FORM 5500

The following table reconciles the financial statements to the Plan Form 5500 as filed for the Plan:

	<u>2019</u>	<u>2018</u>
Net Assets Available for Benefits per the financial statements	\$ 1,255,707,951	\$ 1,104,524,905
Contract value to fair value adjustment for fully benefit-responsive investment contracts reported at fair value on Form 5500	2,260,077	(2,300,485)
Less: Deemed loans distributions	<u>(1,446,380)</u>	<u>(1,311,509)</u>
Net Assets Available for Benefits per the Form 5500	<u>\$ 1,256,521,648</u>	<u>\$ 1,100,912,911</u>

The following is a reconciliation of the net decrease in net assets per the financial statements to the Plan Form 5500 for the year ended December 31, 2019:

Net increase in Net Assets Available for Benefits per the financial statements	\$ 151,183,046
2018 contract value to fair value adjustment	2,300,485
2019 contract value to fair value adjustment	2,260,077
Change in deemed loans	<u>(134,871)</u>
Net increase in Net Assets Available for Benefits per the Form 5500	<u>\$ 155,608,737</u>

NOTE 10 – PLAN AMENDMENTS

The Plan is amended from time to time for various matters, including in connection with acquisitions to provide, among other things, eligibility to participate in the Plan, recognition of prior service, and matching and/or profit-sharing contributions for certain (usually collectively bargained) participants.

NOTE 11 – SUBSEQUENT EVENTS

In March 2020, the World Health Organization declared the outbreak of novel coronavirus disease ("COVID-19") as a global pandemic, triggering volatility in financial markets and a significant negative impact on the global economy. As a result of COVID-19, the current fair value of the Plan's investments may be materially different from the amounts presented on the statement of net assets available for benefits as of December 31, 2019.

The COVID-19 outbreak continues to spread as of the date of this report. There are many uncertainties related to the COVID-19 global pandemic that could negatively affect the Plan's net assets available for benefits and changes in net assets available for benefits.

RR DONNELLEY SAVINGS PLAN

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 and 2018**

NOTE 11 – SUBSEQUENT EVENTS (CONT.)

The Plan's individual investments fluctuate in response to changing market conditions, therefore the effect of the COVID-19 pandemic on its investment values in subsequent periods, if any, cannot be determined.

In response to COVID-19, the United States Congress passed the Coronavirus Aid, Relief and Economic Security Act (CARES Act) to provide expanded access to retirement plan accounts. The Plan adopted provisions under the CARES Act related to distributions, loans and deferred loan repayments for those participants who qualify under the CARES Act.

The Plan has evaluated subsequent events through September 29, 2020, which is the date that the financial statements were approved and available to be issued, for events requiring recording or disclosure in the Plan's financial statements.

SUPPLEMENTARY INFORMATION

RR DONNELLEY SAVINGS PLAN
SCHEDULE H – LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2019
(EMPLOYER IDENTIFICATION NUMBER: 36-1004130, PLAN NUMBER: 003)

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost**	(e) Current Value
INTEREST BEARING CASH				
	United States dollar		\$	555,204
COMMON STOCK				
	1ST CTZNS BANCSHARES INC			425,768
	ACCELERATE DIAGNOSTICS INC			141,960
	ADR AEGON N V			289,920
	ADR ALIBABA GROUP HOLDING LTD			1,871,782
	ADR ASML HLDG NV			957,366
	ADR ASTRAZENECA PLC			1,136,808
	ADR GLAXOSMITHKLINE PLC			1,315,720
	ADR MICRO FOCUS INTL PLC			288,120
	ADR NOVARTIS AG			1,410,881
	ADR ROCHE HLDG LTD			1,504,420
	ADR TENCENT HLDGS LTD			1,618,273
	ADR TENCENT MUSIC ENTMT GROUP			255,850
	ADVANCED MICRO DEVICES INC			531,976
	ALASKA AIR GROUP INC			1,327,900
	ALEXION PHARMACEUTICALS INC			272,430
	ALLIANCE DATA SYS CORP			392,700
	ALNYLAM PHARMACEUTICALS INC			345,510
	ALPHABET INC CL A			4,126,661
	ALPHABET INC CL A			6,697
	ALPHABET INC CL C			1,631,164
	ALPHABET INC CL C			2,339,785
	ALTICE USA INC CL A			853,008
	AMAZON COM INC			5,225,691
	AMERICAN EXPRESS CO			983,471
	APACHE CORP			777,936
	APPLE INC			2,350,962
	APTIV PLC			998,609
	ASSURANT INC			1,258,368
	ATLASSIAN CORPORATION PLC			66,789
	AURINIA PHARMACEUTICALS INC			463,954
	AVANTOR INC			419,265
	AVNET INC			908,216
	AXIS CAPITAL HOLDINGS LTD			855,936
	BAKER HUGHES CO			1,102,090
	BANK NEW YORK MELLON CORP			1,368,976
	BANK OF AMERICA CORP			2,180,118
	BANKUNITED INC			1,067,552
	BECTON DICKINSON & CO			1,272,820
	BIO RAD LABS INC CL A			1,295,105
	BIOMARIN PHARMACEUTICAL INC			201,398
	BLACKBAUD INC			995,000
	BLACKLINE INC			639,344
	BLUEPRINT MEDICINES CORP			1,289,771
	BOEING CO			3,067,030
	BOOKING HLDGS INC			739,343
	BOOKING HLDGS INC			1,232,238
	BORG WARNER INC			997,740
	BOSTON PRIVATE FINL HLDGS INC			594,282
	BOX INC CL A			672,878
	BRIGHTHOUSE FINL INC			243,226
	BRISTOL MYERS SQUIBB CO			1,816,577
	BROWN & BROWN INC			1,168,608
	BRUKER CORP			978,624
	BRUNSWICK CORP			1,205,598
	BURLINGTON STORES INC			1,345,377
	CAPITAL ONE FINL CORP			2,294,893
	CARLISLE COMPANIES INC			1,586,032
	CARVANA CO CL A			202,510
	CELANESE CORP			689,472
	CENTENE CORP			480,578
	CF INDS HLDGS INC			992,992
	CHARTER COMMUNICATIONS INC			2,182,860
	CIGNA CORP			1,389,714
	CIGNA CORP			1,963,104

RR DONNELLEY SAVINGS PLAN
SCHEDULE H – LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2019
(EMPLOYER IDENTIFICATION NUMBER: 36-1004130, PLAN NUMBER: 003)

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost**	(e) Current Value
	CISCO SYSTEMS INC			541,948
	CITRIX SYS INC			920,470
	COGNIZANT TECH SOLUTIONS CORP CL A			613,998
	COLUMBIA SPORTSWEAR CO			1,041,976
	COMCAST CORP NEW-CL A			2,046,135
	CONCHO RES INC			394,941
	CONCHO RES INC			569,205
	COSTAR GROUP INC			494,196
	COWEN INC			248,850
	CROWN HLDGS INC			957,528
	CVS HEALTH CORP			772,616
	DELEK US HLDGS INC			456,008
	DELL TECHNOLOGIES INC			642,375
	DENTSPLY SIRONA INC			945,053
	DISH NETWORK CORP CL A			521,409
	DOLLAR GEN CORP			1,001,236
	DOMINOS PIZZA INC			881,340
	ELDORADO RESORTS INC			554,652
	ELI LILLY & CO			578,292
	ESSENT GROUP LTD			1,497,312
	ETSY INC			722,090
	EVERGY INC			676,936
	EXPEDIA GROUP INC			583,956
	F N B CORP			1,329,690
	FACEBOOK INC			4,388,861
	FEDEX CORP			2,177,424
	FIDELITY NATL INFORMATION SVCS INC			406,838
	FIRST FNDTN INC			567,240
	FIRST HORIZON NATL CORP			601,128
	FIRSTCASH INC			967,560
	FLOWSERVE CORP			1,503,054
	FORTUNE BRANDS HOME & SEC INC			1,470,150
	FOX CORP CL A			673,414
	FOX CORP CL B			129,802
	GAP INC			312,936
	GARTNER INC			909,190
	GCI LIBERTY INC			921,050
	GILEAD SCIENCES INC			669,294
	GLAUKOS CORP			762,580
	GLOBAL BLOOD THERAPEUTICS INC			1,128,758
	GLOBAL PMTS INC			1,808,439
	GOLDMAN SACHS GROUP INC			1,448,559
	HALLIBURTON CO			734,100
	HARLEY DAVIDSON			223,140
	HASBRO INC			918,807
	HCA HEALTHCARE INC			1,196,965
	HD SUPPLY HLDGS INC.			892,884
	HEICO CORP NEW CL A			1,459,339
	HERBALIFE NUTRITION LTD			715,050
	HESS CORP			567,885
	HEWLETT PACKARD ENTERPRISE CO			1,173,640
	HILTON WORLDWIDE HLDGS INC			573,848
	HOLOGIC INC			741,382
	HONEYWELL INTL INC			319,485
	HOWARD HUGHES CORP			900,280
	HP INC			1,420,005
	HUBSPOT INC			1,125,350
	HUMANA INC			403,172
	HUNT J B TRANS SVCS INC			330,721
	HUNTINGTON INGALLS INDS INC			1,154,048
	IAC/INTERACTIVE			580,924
	IBERIABANK CORP			740,817
	IDEX CORP			1,616,800
	INCYTE CORP			174,640
	INGERSOLL			1,155,420
	INNOSPEC INC			858,552
	INSTRUCTURE			530,310
	INTERCONTINENTAL EXCHANGE INC			449,238

RR DONNELLEY SAVINGS PLAN
SCHEDULE H – LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2019
(EMPLOYER IDENTIFICATION NUMBER: 36-1004130, PLAN NUMBER: 003)

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost**	(e) Current Value
		Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value		
	INTUIT			1,422,018
	INTUITIVE SURGICAL INC			1,373,833
	JOHNSON CTLS INTL PLC			1,538,838
	JPMORGAN CHASE & CO			1,101,260
	JUNIPER NETWORKS INC			677,325
	KAISER ALUM CORP			1,020,188
	LANDSTAR SYS INC			1,229,796
	LAS VEGAS SANDS CORP			124,755
	LAZARD LTD CL A			627,372
	LEIDOS HLDGS INC			900,588
	LEVI STRAUSS & CO NEW CL A			1,053,234
	LULULEMON ATHLETICA INC			417,006
	MAGNOLIA OIL & GAS CORP			1,039,108
	MARVELL TECH GROUP			583,523
	MARVELL TECH GROUP			759,616
	MATTEL INC			298,100
	MAXIM INTEGRATED PRODS INC			282,946
	MDU RES GROUP INC			1,191,371
	MEDTRONIC PLC			294,970
	METLIFE INC			1,452,645
	MICROCHIP TECHNOLOGY INC			1,403,248
	MICROSOFT CORP			5,343,034
	MICROSOFT CORP			2,160,490
	MOLINA HEALTHCARE INC			1,085,520
	MOLSON COORS BEVERAGE COMPANY			565,950
	MORNINGSTAR INC			529,585
	MRC GLOBAL INC			893,420
	NATIONAL OILWELL VARCO			325,650
	NETFLIX INC			918,615
	NEUROCRINE BIOSCIENCES INC			1,150,143
	NEWS CORP			106,050
	NEXSTAR MEDIA GROUP INC CL A			738,675
	NEXTERA ENERGY INC			893,328
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	NORFOLK SOUTHN CORP			347,493
	NORTHERN OIL & GAS INC NEV			392,418
	NRG ENERGY INC			659,850
	OCCIDENTAL PETROLEUM CORP			2,060,500
	OKTA INC CL A			134,637
	OLD DOMINION FREIGHT LINE INC			1,461,306
	PARSLEY ENERGY INC CL A			892,552
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	PNM RES INC			557,810
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	RESTAURANT BRANDS INTL INC			382,429
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	SALESFORCE COM INC			1,196,217
	SANOFI SPONSORED ADR			1,782,100
	SAREPTA THERAPEUTICS INC			1,496,864
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	SCHNEIDER NATL INC WIS CL B			687,330
	SCHWAB CHARLES CORP			451,202
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	SEMPRA ENERGY INC			472,769
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	SERVICENOW INC			709,752

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		Maturity Value		
	SKYWORKS SOLUTIONS INC			773,632
	SLACK TECHNOLOGIES INC CL A			202,725
	SOUTH JERSEY INDS INC			1,025,678
	SPLUNK INC			908,205
	SPOTIFY TECHNOLOGY S A			770,482
	STATE STR CORP			87,010
	STERIS PLC			1,097,424
	STRIPE INC CLASS B			28,085
	STRYKER CORP			1,494,563
	SUMMIT MATLS INC CL A			793,480
	TALEND SA ADR			500,608
	TCF FINL CORP			1,647,360
	TD AMERITRADE HLDG CORP			268,330
	TE CONNECTIVITY LTD			1,063,824
	TELADOC HEALTH INC			946,036
	TELEDYNE TECHNOLOGIES INC			901,004
	TIFFANY & CO			574,695
	T-MOBILE US INC			302,180
	TOLL BROS INC			1,066,770
	TREEHOUSE FOODS INC			693,550
	TRIMBLE INC			1,196,503
	TRUIST FINL CORP			901,120
	TWILIO INC CL A			904,176
	UBER TECHNOLOGIES INC			116,343
	UIPATH INC SER D 1			81,615
	UIPATH INC SER D 2			13,694
	UNITED			1,452,672
	UNITED CMNTY BK BLAIRSVILLE GA			951,104
	UNITEDHEALTH GROUP INC			1,166,807
	UNITEDHEALTH GROUP INC			1,322,910
	US FOODS HLDG CORP			959,281
	VERTEX PHARMACEUTICALS INC			1,105,041
	VIEWRAY INC			444,788
	VISA INC			3,633,422
	VMWARE INC CL A			763,504
	VOYA FINL INC			1,286,678
	WELLS FARGO & CO			2,603,920
	WENDYS CO			810,665
	WESTN DIGITAL CORP			933,009
	WEX INC			1,068,246
	WORKDAY INC			519,169
	WORLD WRESTLING ENTMTNT			940,615
	WYNN RESORTS LTD			192,474
	XP INC COM			72,572
	TOTAL COMMON STOCK			238,051,096
	COMMON/COLLECTIVE TRUSTS			
*	COLTV SHORT TERM INVT FD			6,041,565
*	NT COLLECTIVE AGGREGATE BOND INDEX FUND - DC - NON LENDING TIER THREE			91,081,496
*	NORTHERN TR COLLECTIVE 1-10 YR TIPS NDEX FUND NL TIER 4			5,993,689
*	NORTHERN TR COLLECTIVE LONG TERM GOVT BD INDEX FD - NON-LENDING			49,213,641
*	NORTHERN TRUST COLLECTIVE EXTENDED EQTY MKT IDX FD - DC - NON LENDING - TR 3			29,785,694
*	NORTHERN TRUST COLLECTIVE S&P 500 INDEX FUND DC NL TIER FOUR			291,317,355
*	NT COLLECTIVE ALL COUNTRY WORLD EX-US INVESTABLE MARKET INDEX FUND - DC - NONLEN			136,911,254
	SSGA US SHORT TERM GOVERNMENT/CREDIT BOND INDEX NL SERIES CL C			5,981,781
	WELLS FARGO / BLACKROCK SHORT-TERM INVESTMENT FUND S			4,572,998
	WELLS FARGO FIXED INCOME A			34,924,153
	WELLS FARGO FIXED INCOME F			41,559,168
	WELLS FARGO FIXED INCOME L			29,852,367
	TOTAL COMMON/COLLECTIVE TRUSTS			727,235,161
	REGISTERED INVESTMENT COMPANIES			
	AMERICAN EUROPACIFIC GRTH-R6			116,583,367
	DODGE & COX INC FD			52,589,880
	PIMCO FDS INCOME FD INSTL CL			29,220,965
	PIMCO FDS PAC INVT MGMT SER ALL AST FD INSTL			25,680,252

RR DONNELLEY SAVINGS PLAN
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AS OF DECEMBER 31, 2019
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	RESERVE INVT FDS INC T ROWE PRICE GOVT RESERVE FD			16,541
	TOTAL REGISTERED INVESTMENT COMPANIES			224,091,005
OTHER ASSETS				
	SELF-DIRECTED BROKERAGE ACCOUNTS			39,433,606
	APARTMENT INVESTMENT & MANAGEMENT COM USD0.01 CLASS A (POST REV SPLIT)			1,280,920
	CORESITE RLTY CORP COM CORESITE REALTY CORP			1,502,408
	EMPIRE ST RLTY TR INC CL A CL A			864,124
	EQUITY COMMONWEALTH USD0.01(BNF INT)			952,070
	HEALTHCARE TR AMER INC CL A NEW CL A NEW			1,332,320
	MEDICAL PPTY'S TR INC COM REIT			1,380,594
	OUTFRONT MEDIA INC COM			1,035,252
	REDWOOD TR INC COM			846,848
	SABRA HEALTH CARE REIT INC COM			1,323,080
	WEINGARTEN RLTY INVS COM			1,137,136
	TOTAL OTHER ASSETS			51,088,358
* PARTICIPANT LOANS		Interest Rates 4.25%-8.25%		16,246,001
	TOTAL			<u><u>\$ 1,257,266,825</u></u>
* Party in interest				
** Cost information omitted as all investments are fully participant directed.				

RR DONNELLEY SAVINGS PLAN
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AS OF DECEMBER 31, 2019
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(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost**	(e) Current Value
	INTEREST BEARING CASH			
	United States dollar		\$	555,204
	COMMON STOCK			
	1ST CTZNS BANCSHARES INC			425,768
	ACCELERATE DIAGNOSTICS INC			141,960
	ADR AEGON N V			289,920
	ADR ALIBABA GROUP HOLDING LTD			1,871,782
	ADR ASML HLDG NV			957,366
	ADR ASTRAZENECA PLC			1,136,808
	ADR GLAXOSMITHKLINE PLC			1,315,720
	ADR MICRO FOCUS INTL PLC			288,120
	ADR NOVARTIS AG			1,410,881
	ADR ROCHE HLDG LTD			1,504,420
	ADR TENCENT HLDGS LTD			1,618,273
	ADR TENCENT MUSIC ENTMT GROUP			255,850
	ADVANCED MICRO DEVICES INC			531,976
	ALASKA AIR GROUP INC			1,327,900
	ALEXION PHARMACEUTICALS INC			272,430
	ALLIANCE DATA SYS CORP			392,700
	ALNYLAM PHARMACEUTICALS INC			345,510
	ALPHABET INC CL A			4,126,661
	ALPHABET INC CL A			6,697
	ALPHABET INC CL C			1,631,164
	ALPHABET INC CL C			2,339,785
	ALTICE USA INC CL A			853,008
	AMAZON COM INC			5,225,691
	AMERICAN EXPRESS CO			983,471
	APACHE CORP			777,936
	APPLE INC			2,350,962
	APTIV PLC			998,609
	ASSURANT INC			1,258,368
	ATLASSIAN CORPORATION PLC			66,789
	AURINIA PHARMACEUTICALS INC			463,954
	AVANTOR INC			419,265
	AVNET INC			908,216
	AXIS CAPITAL HOLDINGS LTD			855,936
	BAKER HUGHES CO			1,102,090
	BANK NEW YORK MELLON CORP			1,368,976
	BANK OF AMERICA CORP			2,180,118
	BANKUNITED INC			1,067,552
	BECTON DICKINSON & CO			1,272,820
	BIO RAD LABS INC CL A			1,295,105
	BIOMARIN PHARMACEUTICAL INC			201,398
	BLACKBAUD INC			995,000
	BLACKLINE INC			639,344
	BLUEPRINT MEDICINES CORP			1,289,771
	BOEING CO			3,067,030
	BOOKING HLDGS INC			739,343
	BOOKING HLDGS INC			1,232,238
	BORG WARNER INC			997,740
	BOSTON PRIVATE FINL HLDGS INC			594,282
	BOX INC CL A			672,878
	BRIGHTHOUSE FINL INC			243,226
	BRISTOL MYERS SQUIBB CO			1,816,577
	BROWN & BROWN INC			1,168,608
	BRUKER CORP			978,624
	BRUNSWICK CORP			1,205,598
	BURLINGTON STORES INC			1,345,377
	CAPITAL ONE FINL CORP			2,294,893
	CARLISLE COMPANIES INC			1,586,032
	CARVANA CO CL A			202,510
	CELANESE CORP			689,472
	CENTENE CORP			480,578
	CF INDS HLDGS INC			992,992
	CHARTER COMMUNICATIONS INC			2,182,860
	CIGNA CORP			1,389,714
	CIGNA CORP			1,963,104

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	CISCO SYSTEMS INC			541,948
	CITRIX SYS INC			920,470
	COGNIZANT TECH SOLUTIONS CORP CL A			613,998
	COLUMBIA SPORTSWEAR CO			1,041,976
	COMCAST CORP NEW-CL A			2,046,135
	CONCHO RES INC			394,941
	CONCHO RES INC			569,205
	COSTAR GROUP INC			494,196
	COWEN INC			248,850
	CROWN HLDGS INC			957,528
	CVS HEALTH CORP			772,616
	DELEK US HLDGS INC			456,008
	DELL TECHNOLOGIES INC			642,375
	DENTSPLY SIRONA INC			945,053
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	ELDORADO RESORTS INC			554,652
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	STRYKER CORP			1,494,563
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	TRUIST FINL CORP			901,120
	TWILIO INC CL A			904,176
	UBER TECHNOLOGIES INC			116,343
	UIPATH INC SER D 1			81,615
	UIPATH INC SER D 2			13,694
	UNITED			1,452,672
	UNITED CMNTY BK BLAIRSVILLE GA			951,104
	UNITEDHEALTH GROUP INC			1,166,807
	UNITEDHEALTH GROUP INC			1,322,910
	US FOODS HLDG CORP			959,281
	VERTEX PHARMACEUTICALS INC			1,105,041
	VIEWRAY INC			444,788
	VISA INC			3,633,422
	VMWARE INC CL A			763,504
	VOYA FINL INC			1,286,678
	WELLS FARGO & CO			2,603,920
	WENDYS CO			810,665
	WESTN DIGITAL CORP			933,009
	WEX INC			1,068,246
	WORKDAY INC			519,169
	WORLD WRESTLING ENTMTNT			940,615
	WYNN RESORTS LTD			192,474
	XP INC COM			72,572
	TOTAL COMMON STOCK			238,051,096
	COMMON/COLLECTIVE TRUSTS			
*	COLTV SHORT TERM INVT FD			6,041,565
*	NT COLLECTIVE AGGREGATE BOND INDEX FUND - DC - NON LENDING TIER THREE			91,081,496
*	NORTHERN TR COLLECTIVE 1-10 YR TIPS NDEX FUND NL TIER 4			5,993,689
*	NORTHERN TR COLLECTIVE LONG TERM GOVT BD INDEX FD - NON-LENDING			49,213,641
*	NORTHERN TRUST COLLECTIVE EXTENDED EQTY MKT IDX FD - DC - NON LENDING - TR 3			29,785,694
*	NORTHERN TRUST COLLECTIVE S&P 500 INDEX FUND DC NL TIER FOUR			291,317,355
*	NT COLLECTIVE ALL COUNTRY WORLD EX-US INVESTABLE MARKET INDEX FUND - DC - NONLEN			136,911,254
	SSGA US SHORT TERM GOVERNMENT/CREDIT BOND INDEX NL SERIES CL C			5,981,781
	WELLS FARGO / BLACKROCK SHORT-TERM INVESTMENT FUND S			4,572,998
	WELLS FARGO FIXED INCOME A			34,924,153
	WELLS FARGO FIXED INCOME F			41,559,168
	WELLS FARGO FIXED INCOME L			29,852,367
	TOTAL COMMON/COLLECTIVE TRUSTS			727,235,161
	REGISTERED INVESTMENT COMPANIES			
	AMERICAN EUROPACIFIC GRTH-R6			116,583,367
	DODGE & COX INC FD			52,589,880
	PIMCO FDS INCOME FD INSTL CL			29,220,965
	PIMCO FDS PAC INVT MGMT SER ALL AST FD INSTL			25,680,252

RR DONNELLEY SAVINGS PLAN
SCHEDULE H – LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2019
(EMPLOYER IDENTIFICATION NUMBER: 36-1004130, PLAN NUMBER: 003)

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost**	(e) Current Value
	RESERVE INVT FDS INC T ROWE PRICE GOVT RESERVE FD			16,541
	TOTAL REGISTERED INVESTMENT COMPANIES			224,091,005
OTHER ASSETS				
	SELF-DIRECTED BROKERAGE ACCOUNTS			39,433,606
	APARTMENT INVESTMENT & MANAGEMENT COM USD0.01 CLASS A (POST REV SPLIT)			1,280,920
	CORESITE RLTY CORP COM CORESITE REALTY CORP			1,502,408
	EMPIRE ST RLTY TR INC CL A CL A			864,124
	EQUITY COMMONWEALTH USD0.01(BNF INT)			952,070
	HEALTHCARE TR AMER INC CL A NEW CL A NEW			1,332,320
	MEDICAL PPTY'S TR INC COM REIT			1,380,594
	OUTFRONT MEDIA INC COM			1,035,252
	REDWOOD TR INC COM			846,848
	SABRA HEALTH CARE REIT INC COM			1,323,080
	WEINGARTEN RLTY INVS COM			1,137,136
	TOTAL OTHER ASSETS			51,088,358
* PARTICIPANT LOANS		Interest Rates 4.25%-8.25%		16,246,001
	TOTAL			<u><u>\$ 1,257,266,825</u></u>
* Party in interest				
** Cost information omitted as all investments are fully participant directed.				