Edgar Filing: GANNETT CO INC /DE/ - Form 4

GANNETT Form 4	CO INC /DE/									
April 29, 20	09									
•	ЛЛ								PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287	
Check tl if no lon subject t Section Form 4 Form 5		F CHANGES IN BENEFICIAL OWNERSHIP SECURITIES Section 16(a) of the Securities Exchange Act of 1					Estimated burden hoi response	urs per		
obligatic may con <i>See</i> Instr 1(b).	tinue. Section 17			•	•	mpany Act ny Act of 1	of 1935 or Secti 940	on		
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> MCFARLAND DUNCAN M			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			GANNETT CO INC /DE/ [GCI]				(Check all applicable)			
(Last) (First) (Middle) GANNETT CO., INC., 7950 JONES BRANCH DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 04/28/2009			X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
MCLEAN,	VA 22107						Person	wore than one K	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(D) Price	(msu. 5 anu 4)			
Reminder: Re	port on a separate line	e for each cla	uss of sec	urities bene	ficially ow	ned directly	or indirectly.			
					inforr requi	nation cont red to resp	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	

number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Inst
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	(1)	04/28/2009		А		25,235		(2)	(2)	Common Stock	25,235	\$ 1
Phantom Stock	<u>(1)</u>	04/28/2009		А		1,250		(2)	(2)	Common Stock	1,250	S

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
MCFARLAND DUNCAN M GANNETT CO., INC. 7950 JONES BRANCH DRIVE MCLEAN, VA 22107	Х			
Signatures				
/s/ Todd A. Mayman, Attorney-in-Fact				
<u>**</u> Signature of Reporting Person		Date		

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Each share of phantom stock is the economic equivalent of one share of Gannett common stock.
- (2) These shares of phantom stock are payable in cash or stock, at the election of the reporting person, on various dates selected by the reporting person or as otherwise provided in the Issuer's Deferred Compensation Plan.

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