Edgar Filing: NEW YORK TIMES CO - Form 4

NEW YORK	TIMES CO										
Form 4											
May 05, 2015	5										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287		
Check this if no long								January 31,			
subject to	STAT	EMENT O	F CHAN	GES IN BENEFICIAL OWN				NERSHIP OF	Expires: Estimated	2005 average	
Section 16.				SECURITIES					burden hou	•	
Form 4 or									response	0.5	
Form 5 obligation	C	^						ge Act of 1934,			
may conti				•	•			of 1935 or Sectio	n		
See Instru	ction	30(h)	of the Inv	estment (Company	y Act	of 19	40			
1(b).											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person *2. IssuerKOPIT LEVIEN MEREDITH A.Symbol				r Name and Ticker or Trading 5. Relationship of Issuer				of Reporting Person(s) to			
								Issuer			
-			-	NEW YORK TIMES CO [NYT]				(Check all and include)			
(Last)	(First)	(Middle)	3 Date of	Earliest Tra	insaction	-	-	(Chec	ck all applicable	e)	
()	()	()		th/Day/Year)			Director 10% Owner				
THE NEW Y	ORK TIME	S	05/04/20	-			$X_Officer (give titleOther (specify$				
COMPANY, 620 EIGHTH								below) below) EVP and Chief Revenue Officer			
AVENUE											
	(Street)		4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				onth/Day/Year)				Applicable Line)			
								X Form filed by One Reporting Person Form filed by More than One Reporting			
NEW YORK	X, NY 10018							Person	viore man One K	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction							5. Amount of Securities	6. Ownership		
Security (Instr. 3)	(Month/Day/Y	any	on Date, if	n Date, if TransactionAcquired (A) or Code Disposed of (D)					Form: Direct Indirect (D) or Benefic: Indirect (I) Owners		
(Insu: 5)		(Month	(Instr. 8) (Instr. 3, 4 and 5)				Beneficially Owned	Ownership			
			•					•	Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or		(Instr. 3 and 4)			
Class A				Code V	Amount	(D)	Price	, , , , , , , , , , , , , , , , , , , ,			
Class A Common	05/04/2015			А	7,228	٨	\$ 0	49,315	D		
Stock (1)	03/04/2013			A	1,220	А	\$0	+9,313	D		
Stock <u>·</u>											

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
KOPIT LEVIEN MEREDITH A. THE NEW YORK TIMES COMPANY 620 EIGHTH AVENUE NEW YORK, NY 10018			EVP and Chief Revenue Officer					
Signatures								
/s/ Kenneth A. Richieri, Attorney-in-fact Levien	05/05/2015							
**Signature of Reporting Pe	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).
- Consists of grant of stock-settled restricted stock units under The New York Times Company 2010 Incentive Compensation Plan. Each (1) restricted stock unit represents a contingent right to receive one share of Class A Common Stock and vests on the first anniversary of the grant date, assuming continued employment through the applicable vesting date.

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.