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INTERNATIONAL PAPER CO /NEW/ Form 4 November 14, 2006

November 14, 200	06										
FORM 4						CTL MOT			PPROVAL		
	UNITED	STATES		RITIES A shington			COMMISSIO	N OMB Number:	3235-0287		
Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated			
Section 16.SECURTIESburden hours per responseForm 4 orForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Sectionsee Instruction30(h) of the Investment Company Act of 19401(b).Section 17(a) of the Public Utility Holding Company Act of 1940											
(Print or Type Respon	ises)										
1. Name and Address Laschinger Mary	2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL PAPER CO			5. Relationship of Reporting Person(s) to Issuer							
			/NEW/ [IP]				(Check all applicable)				
(Last) (First) (Middle) C/O INTERNATIONAL PAPER, 6400 POPLAR AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 11/10/2006			Director 10% Owner X Officer (give title Other (specify below) below) Vice President					
(S MEMPHIS, TN 3	Street) 38197			endment, D nth/Day/Yea	-	ıl	6. Individual or Applicable Line) _X_ Form filed by Form filed by Person		erson		
(City) (S	State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	nsaction Date th/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	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)		
Reminder: Report on	a separate line	for each cl	ass of seci	urities bene	ficially ow	ned directly o	or indirectly				
					Perso inform requir	ns who res nation cont red to respo nys a curren	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tabl					posed of, or convertible s	Beneficially Owner securities)	d			

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5.	6. Date Exercisable and	7. Title and Amount of	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber	Expiration Date	Underlying Securities	Derivative

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Security (Instr. 3)	or Exercise Price of Derivative Security		any Code (Month/Day/Year) (Instr. 3		· ·		Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock Units	<u>(3)</u>	11/10/2006		А	22 (1)	(4)	(4)	Common Stock	22 <u>(1)</u>	\$ 32.17

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Laschinger Mary A C/O INTERNATIONAL PAPER 6400 POPLAR AVENUE MEMPHIS, TN 38197			Vice President				
Signatures							
Beth Murphree, Attorney-in-Fact f Laschinger	for Mary	А.	11/14/2000	5			

<u>**</u>Signature of Reporting Person

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) Share numbers are rounded.
- The International Paper Company Deferred Compensation Savings Plan (DCSP) is an unfunded deferred compensation plan. Deferrals(2) are placed into various fund equivalents offered by the DCSP, including investments in common stock equivalents of International Paper (units).

Date

- (3) The units are converted to cash based on the stock price of International Paper's common stock at the time of conversion.
- (4) Distributions from the DCSP are made when a participant retires, terminates employment, becomes permanently disabled or dies. All distributions are paid in cash.

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.