#### Edgar Filing: DUN & BRADSTREET CORP/NW - Form 4

### **DUN & BRADSTREET CORP/NW**

Form 4

September 24, 2008

### FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

**OMB** 3235-0287 Number:

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Check this box if no longer subject to Section 16.

Form 4 or Form 5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person ** CLIFFORD PATRICIA A			2. Issuer Name <b>and</b> Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer			
			DUN & [DNB]	BRADS'	TREET CORP/NW	(Che	eck all applicabl	e)	
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ransaction	Director	109		
			(Month/Day/Year)			_X_ Officer (give below)	ve title Oth below)	er (specify	
103 JFK PARKWAY			09/19/20	800		· · · · · · · · · · · · · · · · · · ·	& Chief HR Offi	icer	
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year	)	Applicable Line)			
						_X_ Form filed by	1 0		
SHORT HILLS, NJ 07078						Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-D	Perivative Securities Acq	quired, Disposed (	of, or Beneficia	lly Owned	
1.Title of	2. Transaction	Date 2A. Dee	emed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature	
Security	(Month/Day/Y	ear) Executi	on Date, if	Transaction	on(A) or Disposed of	Securities	Form: Direct	Indirect	

(City)	(State) (Z	Zip) Table	I - Non-De	erivative S	Securi	ties Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securi n(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common	09/19/2008		Code V	Amount 5,456	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4) 22,340	D	
Stock Common Stock	09/19/2008		S		D	<ul><li>53.3</li><li>\$ 98</li></ul>	16,884	D	
Common Stock							1,267.291 (1)	I	Held in 401(k)

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

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number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number out of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and 4	ecı
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	An or No of Sh
Non-Qualified Stock Option - right to buy	\$ 53.3	09/19/2008		M	5,456	02/09/2005(2)	02/09/2014	Common Stock	5

# **Reporting Owners**

	Relationships
Reporting Owner Name / Address	•

Director 10% Owner Officer Other

CLIFFORD PATRICIA A 103 JFK PARKWAY SHORT HILLS, NJ 07078

SVP & Chief HR Officer

### **Signatures**

/s/ Patricia A. O9/23/2008 Clifford

\*\*Signature of Date
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) Held in the issuer's 401(k) plan as of 9/15/08.
- (2) One-fourth of the option vested each year beginning on the date indicated.

#### **Remarks:**

These transactions were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 13, 2008.

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.

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