## Edgar Filing: INTERNATIONAL PAPER CO /NEW/ - Form 4

INTERNATIONAL PAPER CO /NEW/ Form 4 October 09, 2007 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Laschinger Mary A Issuer Symbol **INTERNATIONAL PAPER CO** (Check all applicable) /NEW/ [IP] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_Officer (give title Other (specify (Month/Day/Year) below) below) C/O INTERNATIONAL PAPER 10/05/2007 Senior Vice President COMPANY, 6400 POPLAR **AVENUE** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting MEMPHIS. TN 38197 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature of TransactionAcquired (A) or Form: Direct Indirect Security (Month/Day/Year) Execution Date, if Securities (Instr. 3) Code Disposed of (D) Beneficially (D) or Indirect Beneficial anv (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned (I) Ownership Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	rcisable and	7. Title and A	Amount of	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber			Underlying S		Derivativ
Security	or Exercise		any	Code	of	(Month/Day	/Year)	(Instr. 3 and	4)	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)						(Instr. 5)
	Derivative Security				Securiti					
	Security				Acquire (A) or	u				
					Dispose	d				
					of (D)	u .				
					(Instr. 3					
					4, and 5)					
				Code V	(A) (I	) Date	Expiration	Title	Amount	
				coue ,	(11) (1	Exercisable		THE	or	
									Number	
									of	
									Shares	
Common										
	(1)	10/05/2007		٨	56	(1)	(1)	Common	$\mathbf{F}(2)$	¢ 25.60
Stock	<u>(1)</u>	10/05/2007		А	(2)	(1)	(1)	Stock	56 <u>(2)</u>	\$ 35.62
Units										

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# **Reporting Owners**

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Laschinger Mary A C/O INTERNATIONAL PAPER COMPANY 6400 POPLAR AVENUE MEMPHIS, TN 38197			Senior Vice President						
Signatures									
Rebecca A. Bouldien, Attorney-in-Fact for Mar Laschinger	ry A.		10/09/2007						
<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).

Common stock units (units) held in the non-funded International Paper Company Deferred Compensation Savings Plan (DCSP) (1) represent one share of International Paper common stock. The number of units will vary as the price of the issuer's common stock varies. The units will be settled in cash upon termination of employment.

(2)Share numbers are rounded.

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.