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NEW YORK	K TIMES CO											
Form 4												
April 10, 201	14											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									-	OMB APPROVAL		
CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check the									Expires:	January 31,		
subject to	if no longer subject to STATEMENT OF CHANGE				ES IN BENEFICIAL OWNERSHIP OF					2005		
Section 1		SECURITIES							Estimated average burden hours per			
	Form 4 or								response	•		
Form 5	.						•	ge Act of 1934,				
obligation may cont	Section 17			•	•	• •		f 1935 or Sectio	n			
See Instru 1(b).		30(h)	of the Inv	vestment	Company	y Act	of 194	40				
(Print or Type I	Responses)											
GOLDEN MICHAEL Symbol				er Name and Ticker or Trading YORK TIMES CO [NYT.A]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
												(Last)
			(Month/D	/Day/Year)				X Director 10% Owner				
THE NEW	YORK TIMES		04/08/20)14				X Officer (give below)	e title Other below)	er (specify		
COMPANY	7, 620 8TH AVI	ENUE						· · · · · · · · · · · · · · · · · · ·	ice Chairman			
	(Street)		4 If Amer	ndment De	ate Original			6 Individual or Id	oint/Group Filir	ισ(Check		
				nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
					,			_X_ Form filed by (
NEW YOR	K, NY 10018							Form filed by M Person	Nore than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-I	Derivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Da	ate 2A. Dee	med	3.				5. Amount of	6. Ownership			
Security	(Month/Day/Yea	·	on Date, if	Transaction(A) or Disposed of				Securities	Form: Direct	Indirect Beneficial		
(Instr. 3)		any (Month/	Code (D) h/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned	(D) or Indirect (I)	Ownership		
		(-)	Following	Following (Instr. 4) (In				
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
C1				Code V	Amount	(D)	Price	(instr. 5 and 4)				
Class A	0.4.000.000.000			a			.		P (1)			
Common	04/08/2014			G	57,896	Α	\$0	266,180	D (1)			

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

Stock

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 Derivat Security (Instr. 3	ive Conver y or Exer	rcise f tive	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)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GOLDEN MICHAEL THE NEW YORK TIMES COMPANY 620 8TH AVENUE NEW YORK, NY 10018	Х		Vice Chairman				
Signatures							
/s/ Theodore R. Wagner as Attorney-in-f Golden	04/10/2014						
<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).

In addition, the reporting person owns 1,400,000 shares of Class A Common Stock indirectly by a trust and 3,229 shares of Class A
 (1) Common Stock equivalents attributed to holdings in the Company Stock Fund of The New York Times Companies Supplemental Retirement and Investment Plan, based on a plan statement dated as of March 31, 2014.

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.