Edgar Filing: GESTRICH THOMAS E - Form 4

	THOMAS E											
Form 4	()											
September 10										PPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check the if no long	ter							Expires:	January 31, 2005			
subject to Section 1 Form 4 o Form 5		SECUR	ITIES		NERSHIP OF	Estimated average burden hours per response						
obligation may cont <i>See</i> Instru 1(b).	inue. Section 17	(a) of the		ility Hold	ling Com	pany	Act of	e Act of 1934, f 1935 or Section 40	n			
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u> GESTRICH THOMAS E			Symbol	Name and				5. Relationship of Reporting Person(s) to Issuer				
	/NEW/		AL PAPE	IK CU	0	(Check all applicable)						
(Last)	(Last) (First) (Middle)				ansaction			Director 10% Owner X Officer (give title Other (specify				
	NATIONAL PA 7, 6400 POPLAI		(Month/D 09/15/20	-				below) Senio	below) r Vice Presider	ıt		
	(Street)	Etreet) 4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
MEMPHIS,	TN 38197							Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecuri	ties Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year) Execution any	Execution Date, if		4. Securiti on(A) or Dis (Instr. 3, 4	sposed	l of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
G				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)				
Common Stock	09/15/2008			S	17,000	D	30.6 (1)	179,235 <u>(2)</u>	D			
Common Stock								8,919 (2) (3)	Ι	By Ssp		

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

Edgar Filing: GESTRICH THOMAS E - Form 4

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	rcise any of (Month/D tive		C		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				C	Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting Owners													
Reporting		ner Name / Address		Relationships									
			Direc	tor	10% Owner Officer					Other			
C/O INTE 6400 POF	GESTRICH THOMAS E C/O INTERNATIONAL PAPER COMPANY 5400 POPLAR AVENUE MEMPHIS, TN 38197				Senior Vice President								
Signa	tures												
Rebecca A. Bouldien, Attorney-in-Fact for Thomas E. Gestrich				2.			09/1	6/2008					
	<u>**</u> Sig	nature of Reporting Pers	son				Ι	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).
- (1) Represents the weighted average price for 17,000 shares sold within the range of \$30.60 to \$30.63. Information regarding the number of shares sold at each separate price will be made available from the reporting person upon request by the SEC, the issuer or its shareowners.
- (2) Share numbers are rounded.
- (3) Represents shares of International Paper common stock held through the International Paper Salaried Savings Plan (SSP). This information is based on a plan statement as of August 31, 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.