## Edgar Filing: National CineMedia, Inc. - Form 4

National Cin	eMedia, Inc.									
Form 4	_									
May 04, 201										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									PROVAL	
	UNITE	LD STATES				NGE C	COMMISSION	OMB	3235-0287	
Check the	Check this box Washington, D.C. 20549							Number:	January 31,	
if no longer which the STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP				NEBSHID OF	Expires: 20					
0	subject to Section 16. SECURITIES						Estimated average			
Form 4 o		SECURITES					burden hours per response 0.5			
Form 5	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5		
obligation	ns Section	<b>^</b>				•	1935 or Section	n		
may cont <i>See</i> Instru	inue.		of the Investi	•	· ·					
1(b).				•	•					
(Print or Type F	Responses)									
1 37 1 4		• • *					5 5 1 1.			
1. Name and Address of Reporting Person * Cabot Jeffrey T			2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
Cabot Jenne	y 1		Symbol	Madia Ina	INC		100401			
			National Cir	iemedia, inc	. [INC.	<b>VII</b> J	(Chec	k all applicable	)	
(Last)	(First)	(Middle)	3. Date of Earli							
			(Month/Day/Ye	ear)			Director X Officer (give		Owner er (specify	
	NAL CINEM E. NICHOLS		05/01/2015				below)	below)	a (speeny	
SUITE 200	E. NICHULS	AVE.,					SVP & Inte	erim Co-CFO (	PAO)	
5011L 200										
	(Street)		4. If Amendme	-	al		6. Individual or Jo	int/Group Filin	g(Check	
F			Filed(Month/Da	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person		
CENTENN	IAL, CO 8011	2-3405					Form filed by M			
CLITIC		2 0 100					Person			
(City)	(State)	(Zip)	Table I - N	Non-Derivativ	e Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction l	Date 2A. Deer	med 3.	4. Secu	ities A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	ear) Executio		nsaction(A) or I	-		Securities	Form: Direct		
(Instr. 3)		any (Month/I	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				2		Beneficial Ownership	
		(MOIIII/I	Jay/Teal) (IIIs	u. o)			Following	Indirect (I) (Instr. 4)	(Instr. 4)	
					(A)		Reported	× /	× /	
					or		Transaction(s)			
			Cod	le V Amoun		Price	(Instr. 3 and 4)			
Common	05/01/2015		F	130 (1)	D	\$	53,753	D		
Stock			1	100 _	_	15.26				

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 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	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						
1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Director	10% Owner	Officer	Other			
Cabot Jeffrey T			SVP &				
C/O NATIONAL CINEMEDIA, INC.	Interim						
9110 E. NICHOLS AVE., SUITE 200	Co-CFO						
CENTENNIAL, CO 80112-3405			(PAO)				
Signatures							

/s/ Teri A. Scott, as	05/04/2015
attorney-in-fact	05/04/2015

\*\*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).
- (1) Represents withholding of shares to satisfy tax obligations upon the vesting of restricted stock.

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.