SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response:

| | ss of Reporting Pers | | 2. Issuer Name and Ticker or Trading Symbol GANNETT CO INC /DE/ [GCI] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|----------------------|----------|---|---|---|--------------------------|--|--|--|--|
| TRUJILLO SOLOMON D | | | | X | Director | 10% Owner | | | | |
| (Last) (First) GANNETT CO., INC. | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 07/31/2003 | | Officer (give title below) | Other (specify below) | | | | |
| 7950 JONES BRANCH DRIVE | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applic: Line) | | | | | | |
| (Street) MCLEAN | N VA 22107 | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (State) | (Zip) | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |

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| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 3. Transa Code (8) | ction | 4. Securities A Disposed Of (| | | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | ial hip |
|---------------------------------|--|------------------------------|-------|----------------------------------|---------------|-------|------------------------------------|---|------------|
| | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | (1150.4) | |

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. Transa Code (8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|------------|-----|--|--------------------|---|-------------------------------------|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Phantom Stock | (1) | 07/31/2003 | | Α | | 235.826 | | (2) | (2) | Common Stock | 235.826 | \$77.3903 | 443.394 | D | |

Explanation of Responses:

1. These shares of phantom stock convert to common stock on a one-for-one basis.

2. These shares of phantom stock are payable on various dates selected by the reporting person or as provided in the issuer's Deferred Compensation Plan.

Remarks:

Todd A. Mayman, Attorney-in-

Fact

08/04/2003

** Signature of Reporting Person Date

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.