Edgar Filing: Scaife Georgia R. - Form 4

Scaife Georg Form 4	ia R.											
January 13, 2	009											
										OMB APPROVAL		
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru	er STATEM 5. 5. Filed pur ¹⁸ Section 17(a	Section 16 Public Ut	 CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES ection 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940 						January 31 Expires: 2005 Estimated average burden hours per response 0.5			
1(b).	cuon	()			- I · · ·							
(Print or Type R	esponses)											
1. Name and Address of Reporting Person <u>*</u> Scaife Georgia R.			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
<i>(</i> -),	(First) (N	(liddle)	IDEARC INC. [IDAR.PK]					(Check all applicable)				
(Last) 2200 WEST	3. Date of Earliest Transaction (Month/Day/Year) 01/09/2009					Director 10% Owner X Officer (give title Other (specify below) below) EVP - HR & Employee Admin.						
				. If Amendment, Date Original ïled(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
DFW AIRPO	ORT, TX 75261								More than One Re			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ities Acc	uired, Disposed o	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Date Execut any (Month		Execution any	med on Date, if	3. 4. Securities Acquire Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			cquired d of	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
~				Code V		or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	01/09/2009			F	2,580 (1)	D	\$ 0.11	83,429 <u>(2)</u>	D			
Common Stock								15	I	By 401(k) Plan		

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

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 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title Amour Underl Securit (Instr. 2	nt of ying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
r of the second second	Director	10% Owner	Officer	Other				
Scaife Georgia R. 2200 WEST AIRFIELD DRIVE DFW AIRPORT, TX 75261			EVP - HR & Employee Admin.					
Signatures								
Larry D. Cannon, Attorney-in-fac Scaife	t for Geo	rgia R.	01/13/2009					
<u>**</u> Signature of Reporting Pe	rson		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).

On January 9, 2009, one-third of the shares of restricted stock granted to Ms. Scaife on January 9, 2007 vested. In addition, 908 shares of (1) Idearc common stock were received upon settlement of dividend equivalent RSUs related to these shares of restricted stock. The 2,580 shares reported on this Form 4 were withheld to satisfy tax withholding obligations related to the foregoing.

Includes 907 dividend equivalent RSUs accrued on shares of restricted stock held by Ms. Scaife. The dividend equivalent RSUs accrued

(2) when and as dividends were paid on Idearc common stock and are subject to the same vesting provisions of the shares of restricted stock to which they relate.

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.