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FIELD DAV Form 4										
FORN	ГЛ	STATES					GE C	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed pur sinue. sction	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								
(Print or Type F	ddress of Reporting	Person *	2.1	N	T. 1 T.	1.		5. Relationship of	Reporting Pers	son(s) to
FIELD DAV			Symbol	СОМ СО	Ticker or Ti	-		Issuer	c all applicable	
		P., 401	3. Date of (Month/D 12/23/20	-	ansaction			X Director X Officer (give below) Presi	X10% titleOthe below) dent and CEO	
	(Street) IWYD, PA 1900			ndment, Da th/Day/Year)	-			6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person	one Reporting Pe	rson
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	tion Date, if Transaction(A) o			and 5) (A)	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
Class A Common Stock, par value \$.01 per share	12/23/2010			Code V	Amount 450,000	or (D) A	Price \$ 0 (1)	(Instr. 3 and 4)	D	
Class A Common Stock, par value \$.01 per share	12/23/2010			A	225,000	A	\$ 0 (2)	1,525,770	D	

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Class A Common Stock, par value \$.01 per share	1,566,542	Ι	By Trust

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. Transact Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Secur	unt of rlying	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						
	Director	10% Owner	Officer	Other				
FIELD DAVID J C/O ENTERCOM COMMUNICATIONS CORP. 401 CITY AVENUE, SUITE 809 BALA CYNWYD, PA 19004	Х	Х	President and CEO					
Signatures								
David J. Field by Andrew P. Sutor, IV, authorized signatory		12/28/2010						
**Signature of Reporting Person		Dat	e					
Evaluation of Decanonace								

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) These shares respresent restricted stock subject to time based vesting, as described in the grant instrument.

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(2) These shares respresent restricted stock subject to performance based vesting, as described in the grant instrument.

These shares are indirectly beneficially owned by the Reporting Person as follows: (i) 206,094 shares held by a trust for the benefit of the sister of the Reporting Person for which the Reporting Person is a co-trustee: (ii) 438,876 shares held by a trust for the benefit of the

(3) Reporting Person for which the Reporting Person is a co-trustee; (iii) 423,286 shares held by a trust for the benefit of the issue of the sister of the Reporting Person for which the Reporting Person is a co-trustee; and (iv) 498,286 shares held by a trust for the benefit of the issue of the Reporting Person for which the Reporting Person is a co-trustee.

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.