FINAL

Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-2224

Internal Revenue Service			See separate instructions.		
Part I Reporting	Issuer				
1 Issuer's name				2 Issuer's employe	r identification number (EIN)
NATIONAL CINEMEDIA, IN	IC.			2	0-5665602
3 Name of contact for add		5 Email address of c	5 Email address of contact		
TOM MORRISON		TOM.MORRISON@N	CM.COM		
6 Number and street (or F	P.O. box if mail is not de	7 City, town, or post of	fice, state, and Zip code of contact		
9110 EAST NICHOLS AVE	NUE, SUITE 200	CENTENNIAL, CO 80	112-3405		
8 Date of action					
2011 - SEE LINE 14		СОММС	ON STOCK		
10 CUSIP number	11 Serial number(s)		12 Ticker symbol	13 Account number(s	 S)
635309107			NCMI		
	onal Action Attach	additiona		ee back of form for additio	nal questions
				te against which shareholders	<u> </u>
•				R 2011 THE DATE OF RECO	·
				20/SHARE; AUGUST 18, 201	
AND NOVEMBER 17, 2011		2011 40.2	0,0111 (1(2,1411 (1 1), 2011 (0.	20/011/11(2//10/0001 10/20)	T WO.ZZ/OTH (TCZ)
THIS HOTEMBER TIPEST	¥01227011111121				
	-			rity in the hands of a U.S. taxp	
				ARE TO BE TREATED AS	
	R FEDERAL INCOME T	AX PURP	OSES AND THE REMAINING	G 33.86% ARE TO BE TREAT	red as an
ORDINARY DIVIDEND.					
	-			ation, such as the market valu	
				THE PERCENTAGE OF EAC	
				PROFITS ("E&P"). THE AM	OUNT NOT COMING
FROM ACCUMULATED OF	R CURRENT E&P IS CO	JNSIDERI	ED A NON-TAXABLE DISTR	IBUTION.	

Part I		Organizational Action (continued)			
17 Li		applicable Internal Revenue Code section		ax treatment is based	•
IRC 301	c(2) A	ND IRC 301c(3)			
18 C:	an anv	resulting loss be recognized? ► THE TA	AX TREATMENT OF THE NON-TAXA	RI F DISTRIBUTION N	IFEDS TO BE DETERMINED
		AREHOLDER IN CONSULTATION WITH		BEE BIOTRIBOTION I	ieebo to be betermineb
	2.11				
19 Pı	ovide	any other information necessary to impler	ment the adjustment, such as the repo	rtable tax year ▶	
Sian		r penalties of perjury, I declare that I have examit it is true, correct, and complete. Declaration of			
Sign Here	Signa	ture ▶	Date ►		
		· ·			
	Print	your name ▶		Title ►	
Paid Prepa		Print/Type preparer's name	Preparer's signature	Date	Check if self-employed PTIN
		Firm's name			Firm's EIN ▶
Use Only		Firm's address ▶			Phone no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054