## Edgar Filing: COSENTINO ERIC F. - Form 4

COSENTIN	O ERIC F.										
Form 4											
April 16, 200	07										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE CO Washington, D.C. 20549					COMMISSION	OMB Number:	3235-0287				
Check this box if no longer subject to STATEMENT OF CH									Expires:	January 31,	
				HANGES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005 Verage	
Section 16.				SECURITIES					burden hours per		
Form 4 o									response	0.5	
Form 5 obligatio	<b>n</b> o <b>*</b>						•	e Act of 1934,			
may cont				•	•	· ·	•	1935 or Section	1		
See Instruction 1(b).	uction	30(h)	of the In	vestment	Compar	ıy Ас	t of 194	-0			
1(0).											
(Print or Type I	Responses)										
1. Name and A	Address of Reporting	Person <u>*</u>	2. Issue	2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
COSENTINO ERIC F.			Symbol				U	Issuer			
			IDT CC	IDT CORP [IDT,IDT.C]				(Check all applicable)			
(Last)	(First) (	Middle)	3. Date of Earliest Transaction				(Check	an applicable	)		
			(Month/Day/Year)					_X_ Director 10% Owner			
C/O IDT CORPORATION, 520 04/			04/13/2	04/13/2007				Officer (give title Other (specify below)			
BROAD STREET								below)	below)		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
	Filed(Mor	Filed(Month/Day/Year)									
NEWADZ	NI 07102							_X_Form filed by O Form filed by M			
NEWARK,	NJ 0/102							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secur	rities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date	e 2A. Deen	ned	1			-	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)		n Date, if					Securities Beneficially Owned	Form: Direct I (D) or 0	Indirect Beneficial Ownership (Instr. 4)	
(Instr. 3)		any (Month/F	Dav/Year)				5)				
		(111011111)2	.uj, 10ul)					Following			
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(Insu: 5 and 1)			
Class B											
Common Stock, par	04/13/2007			S	3,250	D	\$	5,532 <u>(1)</u>	D		
value \$.01	0-1/13/2007			5	5,250	D	11.201	<i>3,332</i> <u>~</u>	D		
per share											
1											

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.

## Edgar Filing: COSENTINO ERIC F. - Form 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int 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**

<b>Reporting Owner Name / Address</b>	Relationships						
i o	Director	10% Owner	Officer	Other			
COSENTINO ERIC F. C/O IDT CORPORATION 520 BROAD STREET NEWARK, NJ 07102	Х						
Signatures							
Joyce J. Mason, by Power of Attorney		04/16/200	)7				
**Signature of Reporting Person		Date					
Explanation of Responses:							

## 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) Consists of fully vested shares 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.