## Edgar Filing: NORTH AMERICAN GALVANIZING & COATINGS INC - Form 4

NORTH AM Form 4 April 01, 200 <b>FORM</b>	Λ						NCE	CONDUCCI			B APPROVAI	L	
	- UNITED	Washington, D.C. 20549								OMB Numbe	3235-028		
Check this if no longe subject to Section 16 Form 4 or	er <b>STATEN</b> 5.									Expires: January 31, 2005 Estimated average burden hours per response 0.5			
Form 5 obligation may contin <i>See</i> Instruct 1(b).	s Section 17(	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 R	esponses)												
1. Name and Address of Reporting Person <u>*</u> HENRY JANICE K			2. Issuer Name <b>and</b> Ticker or Trading Symbol NORTH AMERICAN GALVANIZING & COATINGS INC [NGA]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <u>X</u> Director Officer (give title 10% Owner below) Other (specify below)					
(Last) (First) (Middle) 5314 S YALE AVENUE SUITE 1000		<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>04/01/2009</li></ul>											
(Street) 4. Fil				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
TULSA, OK								Person	•				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Ao	cquired, Dispose	d of, a	or Bene	ficially Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	) Executi any	emed on Date, if /Day/Year)	3. Transactio Code (Instr. 8) Code V	4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) of l of (E 4 and (A) or	))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Forn Dire	ct (D) direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
COMMON STOCK, \$.10 PAR	04/01/2009			A		A	<u>(1)</u>	18,164	I		BY THE COMPANY DIRECTOR STOCK UN TRUST	R	
COMMON STOCK, \$.10 PAR								13,333	D				

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date				
				a							
				Code V	(A) (D)				Shares		
				Code V	(A) (D)		-	Title	Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
HENRY JANICE K 5314 S YALE AVENUE SUITE 1000 TULSA, OK 74135	X			
Signatures				
/S/JANICE K. HENRY BY BETH B. F ATTORNEY-IN-FACT	04/01/2009			
<u>**</u> Signature of Reporting	Person			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).
- DIRECTOR COMPENSATION EARNED IN 2009 PLUS A MATCHING AMOUNT FROM THE COMPANY WAS DEFERRED (1) UNDER THE DIRECTOR STOCK UNIT PROGRAM. THE DEFERRED AMOUNTS WERE CONVERTED INTO THE RIGHT TO
- RECEIVE 5,262 SHARES OF COMPANY STOCK ON OR SHORTLY AFTER JANUARY 1, 2015. 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.