Edgar Filing: ALBEMARLE CORP - Form 4

ALBEMARI	LE CORP											
Form 4												
July 18, 2006	5											
									OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287			
Check thi			-						Expires:	January 31,		
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005 verage		
Section 1				SECURITIES					burden hours per			
Form 4 or									response	. 0.5		
Form 5 obligation	*						•	e Act of 1934,				
may cont				•	•	· ·		1935 or Sectior	1			
<i>See</i> Instru 1(b).		30(h)	of the In	vestment	Compan	y Ac	t of 194	-0				
(Print or Type F	Responses)											
PRESTON SEYMOUR S III Symbol				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
				IARLE C	ORP [A	LB]		(Chask all applicable)				
(Last) (First) (Middle) 3. Date of			3 Date of	of Earliest Transaction				(Check all applicable)				
330 DUTTON MILL ROAD 07/14/20								X Director	10%	Owner		
				-				Officer (give title Other (specify below)				
	(Street)		4. If Ame	mendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(M			Filed(Mor	nth/Day/Year))			Applicable Line)				
WEST CHE	ESTER, PA 193	80						_X_ Form filed by O Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Aca	uired, Disposed of	. or Beneficial	v Owned		
1.Title of	2. Transaction Da	ata 24 Daar		3.				5. Amount of		-		
Security	(Month/Day/Yea		Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D)			Securities	6. Ownership Form: Direct			
(Instr. 3)	× ž	Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8)					Beneficially		Beneficial			
							Owned	Indirect (I)	Ownership			
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
C				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	07/14/2006			А	100 (1)	А	\$ 44.95	15,931	D			
STOCK							44.93					

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)

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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	Transacti	orNumb	ber	Expiration Da	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)	Deriva	ative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securi	ities			(Instr.	. 3 and 4)		Owne
	Security				Acqui	ired						Follo
	2				(A) or							Repo
					Dispo							Trans
					of (D)							(Instr
					(Instr.							
					4, and 5)							
					<i>,</i>							
				Code V	(A) ((D)	Date	Expiration	Title	Amount		
							Exercisable	Date		or		
										Number		
										of		
										Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
PRESTON SEYMOUR S III 330 DUTTON MILL ROAD WEST CHESTER, PA 19380	Х							
Signatures								
Nicole C. Daniel, attorney in fact	07	/18/2006						
**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).
- (1) Shares represent quarterly installment of non-employee director's stock compensation pursuant to Non-Employee Director Stock Plan.

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.