Edgar Filing: WOODS M TROY - Form 4

Check this box if no longer subject to Section 16. UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OME Num STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Expin Estin burd								OMB Number: Expires: Estimated a burden hou response	rs per		
(Print or Type I	Responses)										
WOODS M TROY Symbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/Date) P. O. BOX 2506 01/26/20			-				X Director 10% Owner X Officer (give title Other (specify below) below) President and COO				
Filed(Mon				nendment, Date Original onth/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 			
	JS, GA 31902-25							Person		F0	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any		3. Transactic Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4	sposed 4 and 5 (A) or	l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	01/06/0000			Code V	Amount 14,778	(D)	Price		D		
Stock	01/26/2009			А	<u>(1)</u>	А	\$0	259,859 <u>(2)</u>	D		
Common Stock	01/26/2009			F	9,703	D	\$ 12.9	250,156	D		
Common Stock								2,279	I	By Spouse	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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				
WOODS M TROY P. O. BOX 2506 COLUMBUS, GA 31902-2506	Х		President and COO					
Signatures								
Garilou Page, Attorney-in-Fact	01/28	8/2009						
**Signature of Reporting Person	D	ate						

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).

These performance shares were originally granted effective March 31, 2008, but were denominated in dollars instead of in shares on the grant date and the number of shares was not determinable until January 26, 2009 based on the Compensation Committee's certification

- (1) of the company's earnings per share for 2008. Each performance share represents the right to receive one share of the company's common stock. The actual number of shares to be issued is subject to upward or downward adjustment of up to 20%, based on the company's total shareholder return for the three-year period ending December 31, 2010. No shares will be issued until the Compensation Committee certifies that three-year performance, which certification will occur after December 31, 2008.
- (2) Includes shares acquired through dividend reinvestment and through exempt purchases in the issuer's employee stock purchase plan.

Remarks:

The reporting person no longer has a reportable beneficial interest in shares owned by his son and previously included in the re-

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.