## Edgar Filing: POWELL WILLIAM P - Form 4

POWELL W	ILLIAM P									
Form 4										
August 27, 2	.008									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								<b>T</b>	PPROVAL	
								ONID	3235-0287	
Check the	is box	was	nington,	D.C. 20:	549			Number:	January 31,	
if no longer					NEDSHID OF	2005				
subject to	statement of changes in Beneficial Owner					NEKSIIII OF	Estimated average			
Section 1 Form 4 o		SECUNITIES						burden hou response		
Form 5		uant to Section 16	5(a) of the	e Securiti	ies Ez	xchang	ge Act of 1934.	response	0.0	
obligation	ns Section 17(a)	) of the Public Ut						n		
may cont See Instru	inue.	30(h) of the Inv	•	•	- ·					
1(b).										
(Print or Type I	Responses)									
1 Name and A	ddress of Reporting P	erson * a t			т I <sup>,</sup>		5 Palationship o	f Deporting Der	son(s) to	
POWELL V	Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
			(Chec					ck all applicable)		
(Last)	(First) (M	,	3. Date of Earliest Transaction (Month/Day/Year)			XDirector10% Owner				
1800 WASHINGTON ROAD 08/25/20			-			Officer (give titleOther (specify				
1000 11101		00/23/20	,00				below)	below)		
(Street) 4. If Amer			nendment, Date Original				6. Individual or Joint/Group Filing(Check			
		Filed(Mon	th/Day/Year)				Applicable Line)	One Denestine D		
DITTODUD	CH DA 15241						_X_ Form filed by Form filed by 1	More than One R		
FILISDUK	GH, PA 15241						Person			
(City)	(State) (2	Zip) Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Deemed	3. 4. Securities				5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution Date, if	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)			Securities	Form: Direct	Indirect Beneficial Ownership		
(Instr. 3)		any (Manth/Day/Vaar)				Beneficially Owned				
		(Month/Day/Year)	(11150. 0)	(1150.3, 4  and  3)				Indirect (I) (Instr. 4)	(Instr. 4)	
					(A)		Reported	× /	· /	
					or		Transaction(s)			
			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common										
shares,	00/05/0000			$\mathbf{O}(1)$		<b>. . .</b>	0.100(2)	D		
\$0.01 par	08/25/2008		А	2 (1)	А	\$0	8,190 <u>(2)</u>	D		
value per share										

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.

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 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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amou Under Securi (Instr.	nt of lying	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**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
POWELL WILLIAM P 1800 WASHINGTON ROAD PITTSBURGH, PA 15241	X						
Signatures							
Alexander Reyes, his attorney-in-fact		08/27/2	008				
**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) Represents dividend equivalent rights earned under the Equity Incentive Plan as part of a grant of restricted stock units.
- (2) Of the 8,190 shares owned directly, 4,190 are restricted stock units including dividend equivalent rights. The total number of shares has been adjusted from the previous Form 4 filing due to the reconciliation of minor discrepancies in prior calculations.

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.