Edgar Filing: Shoemaker Anne M - Form 4

| Snoemaker Form 4 | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------|-------------|---------------------------------------|------------------|--------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------|
| November 2 | | | | | | | | | | OMB AF | PROVAL |
| FORM | /1 4 UNITED | STATES S | | | | | | ANGE CO | OMMISSION | OMB Number: | 3235-0287 |
| Check th if no lon subject to Section Form 4 Form 5 obligation may con <i>See</i> Insta | nger to 16. or Filed pur ^{Dns} Section 17(| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | | | | January 31, 2005 verage rs per 0.5 |
| 1(b). (Print or Type | Responses) | | | | | | | | | | |
| | Address of Reporting | s C | ymbol | RD IN | | d Ticker o JSTRIES | | 1 | 5. Relationship of I Issuer (Check | Reporting Pers | |
| (Last) 222 PIEDN | (First) (1 MONT AVE., NE | (1 | Date o Month/I 1/18/2 | Day/Yea | | ransaction | L | 1 | Director X Officer (give t below) Vic | | Owner r (specify |
| ATLANTA | (Street) A, GA 30308 | | If Ame iled(Mo | | | ate Origin r) | al | | 5. Individual or Joi Applicable Line) _X_ Form filed by Ou Form filed by Mo Person | ne Reporting Per | rson |
| (City) | (State) | (Zip) | Tab | le I - N | on-l | Derivative | e Secu | | ired, Disposed of, | or Beneficial | v Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | ate, if | 3. | actic 8) | 4. Securi pror Dispo (Instr. 3, | ties A sed of | cquired (A) (D) | · • • | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock | 11/18/2005 | 11/18/200 | 5 | М | | 200 | A | \$ 13.9375 | 1,219 | D | |
| Common Stock | 11/18/2005 | 11/18/200 | 5 | М | | 400 | A | \$ 8.625 | 1,619 | D | |
| Common Stock | 11/18/2005 | 11/18/200 | 5 | М | | 500 | А | \$ 10.725 | 2,119 | D | |
| Common Stock | 11/18/2005 | 11/18/200 | 5 | S | | 200 | D | \$ 53.935 | 1,919 | D | |
| Common Stock | 11/18/2005 | 11/18/200 | 5 | S | | 400 | D | \$ 53.935 | 1,519 | D | |

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| Common | 11/18/2005 | 11/10/2005 | c | 500 | D | \$ 52 025 1 010 | D | |
|--------|------------|------------|---|-----|---|-----------------|---|--|
| Stock | 11/18/2003 | 11/18/2003 | 3 | 300 | D | \$ 53.935 1,019 | 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 Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | onof Deriv Secur Acqu (A) o Dispo of (D | rities ired r osed) : 3, 4, | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------|---------------------------------------------|-----------------------|---------------------------------------------------------------------|-----------------|----------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Option (Right to Buy) | \$ 10.725 | 11/18/2005 | 11/18/2005 | М | | 500 | 07/16/2005 <u>(1)</u> | 07/16/2011 | Common Stock | 500 |
| Employee Stock Option (Right to Buy) | \$ 8.625 | 11/18/2005 | 11/18/2005 | М | | 400 | 07/10/2005 <u>(2)</u> | 07/10/2010 | Common Stock | 400 |
| Employee Stock Option (Right to Buy) | \$ 13.9375 | 11/18/2005 | 11/18/2005 | М | | 200 | 07/12/2005 <u>(3)</u> | 07/12/2009 | Common Stock | 200 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--------------------------------|---------------|-----------|----------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Shoemaker Anne M | | | Vice President | | | | | |
| 222 PIEDMONT AVE., NE | | | | | | | | |

ATLANTA, GA 30308

Signatures

/Mary Margaret Heaton/Attorney-In-Fact for Anne Shoemaker

**Signature of Reporting Person

11/22/2005

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) The option vests in five equal annual installments beginning July 16, 2002.
- (2) The option vests in five equal annual installments beginning July 10, 2001.
- (3) The option vests in five equal annual installments beginning July 12, 2000.

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.