#### Edgar Filing: SCS TRANSPORTATION INC - Form 4

SCS TRANSPORTATION INC Form 4 February 02, 2005 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to **SECURITIES** Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading TRUCKSESS HERBERT A III Issuer Symbol SCS TRANSPORTATION INC [SCST] \_X\_ Director (Last) (First) (Middle) 3. Date of Earliest Transaction X\_Officer (give title (Month/Day/Year) below) 4435 MAIN STREET, SUITE 930 02/01/2005 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person KANSAS CITY, MO 64111 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired (A) 5. Amount of 6. 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction Disposed of (D) Securities Ownership Indirect (Instr. 3) any Code (Instr. 3, 4 and 5) Beneficially Form: Beneficial (Month/Day/Year) Owned Direct (D) Ownership (Instr. 8) Following or Indirect (Instr. 4) Reported  $(\mathbf{I})$ (A) Transaction(s) (Instr. 4) or (Instr. 3 and 4) Code V Amount (D) Price Common 02/01/2005 Μ 2.259 Α \$6.61 50,131 D Stock Common 02/01/2005 8,500 \$6.61 D Μ Α 58,631 Stock Common \$ S 02/01/2005 8,500 D D 50,131 23.0859 Stock Common 100,000 (1) Ι By Trust Stock

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

(Check all applicable)

President & Chief Exec Officer

Form filed by More than One Reporting

below)

OMB

Number:

3235-0287

Expires: 2005 Estimated average burden hours per response... 0.5

10% Owner

Other (specify

OMB APPROVAL

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Da (Month/Day/Y	te	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to buy)	\$ 4.363					10/01/2002	10/25/2010	Common Stock	38,308
Stock Options (Right to buy)	\$ 4.587					02/23/2002	02/23/2010	Common Stock	204,664
Stock Options (Right to buy)	\$ 4.818					10/01/2002	07/16/2008	Common Stock	145,539
Stock Options (Right to buy)	\$ 6.61	02/01/2005		М	8,500	10/01/2002	07/15/2007	Common Stock	8,500
Stock Options (Right to buy)	\$ 6.61	02/01/2005		М	2,259	10/01/2002	07/15/2007	Common Stock	2,259

### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
TRUCKSESS HERBERT A III 4435 MAIN STREET, SUITE 930 KANSAS CITY, MO 64111	Х		President & Chief Exec Officer			

# Signatures

<u>\*\*</u>Signature of Reporting Person

James J Bellinghausen

02/02/2005

	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).
- (1) Includes 100,000 shares transferred by reporting person to revocable trust for benefit of reporting person and reporting person's wife and children.

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.