Edgar Filing: Smith Robert John - Form 4

Smith Robert John								
Form 4								
March 10, 2009								
FORM 4 UNITED STAT	TES SECURITIES A	ND FYCH	IANCE (OMMISSION		PPROVAL		
CONIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287		
Check this box	(January 31,		
Section 16. Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: 2005 Estimated average burden hours per response 0.5			
Form 5 obligations may continue. See Instruction 1(b). 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 30(h) of the Investment Company Act of 1940								
(Print or Type Responses)								
1. Name and Address of Reporting Person Smith Robert John	* 2. Issuer Name and Symbol	Ticker or Tra	ading	5. Relationship of Reporting Person(s) to Issuer				
	ATLANTIC COA CORP [ACFC]	ATLANTIC COAST FEDERAL CORP [ACFC]			(Check all applicable)			
(Last) (First) (Middle)	(Month/Day/Year)	3. Date of Earliest Transaction (Month/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify below) below)			
505 HAINES AVENUE 03/06/2009 00/06/2009								
(Street)	(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				
WAYCROSS, GA 31501								
(City) (State) (Zip)	Table I - Non-D	erivative Sec	curities Acc	quired, Disposed of	, or Beneficial	lly Owned		
(Instr. 3) any		on(A) or Dispo (D)	osed of	SecuritiesIBeneficially()OwnedIFollowing()	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Code V	C	A) or D) Price	Reported Transaction(s) (Instr. 3 and 4)				
Common 03/06/2009 Stock	Р	500 A	\$ 2.05	28,277	I	By Trust		
Common 03/09/2009 Stock	Р	1,000 A	\$ 2	29,277	I	By Trust		
Common Stock				4,893	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

Edgar Filing: Smith Robert John - Form 4

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. Transactic Code (Instr. 8)	5. 6. Date Exercisable and Number Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secur (Instr	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 13.73					07/28/2006	07/28/2015	Common Stock	14,300 (1)	
Stock Options	\$ 13.7					10/11/2006	10/11/2015	Common Stock	7,150 (2)	

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Smith Robert John 505 HAINES AVENUE WAYCROSS, GA 31501	Х				
Signatures					

/s/ Richard S. Garabedian, Pursuant to Power of Attorney	03/10/2009	
**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) Represents stock options that vest at a rate of 20% per year commencing on July 28, 2006.

(2) Represents stock options that vest at a rate of 20% per year commencing on October 11, 2006.

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.