Edgar Filing: ASTEC INDUSTRIES INC - Form 4

ASTEC IND	USTRIES INC											
Form 4												
November 12	2, 2008											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287		
Check this box								Expires:	January 31,			
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNER				NERSHIP OF	Estimated a	2005		
	Section 16.				ITIES				burden hours per			
Form 4 or								response				
Form 5 obligatior	· · · · · · · · · · · · · · · · · · ·						-	e Act of 1934,				
may conti				•	•	· ·		1935 or Section	1			
<i>See</i> Instru 1(b).	iction	30(h)	of the In	vestment	Compan	у Ас	t of 194	-0				
(Print or Type R	Responses)											
TELLOCK GLEN E Symbol				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
				INDUSTRIES INC [ASTE]				(Check all applicable)				
(Last) (First) (Middle) 3. Date of				f Earliest Transaction				(Check an applicable)				
(Month/I			(Month/D	Day/Year)				_X_ Director	10%	Owner		
			11/12/2	-				Officer (give titleOther (specify below)				
	(Street)		4. If Ame	ndment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon			nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person					
CHATTAN	OOGA, TN 3742	21						_X_Form filed by C Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	any		ned n Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			d of (D)	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or			
			Day/Year)				Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)	Indirect (I) (Instr. 4)			
Common Stock	11/12/2008			А	289 <u>(1)</u>	, í	\$ 24.25	2,225	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	2.	3. Transaction Date	3A. Deemed	4.	5.		6. Date Exerc	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		ber	Expiration Date		Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of (Month/Day/Year)		Year)	Underlying		Security	Secu	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriva	vative	ve		Secur	ities	(Instr. 5)	Bene
	Derivative				Securi	rities			(Instr	. 3 and 4)		Owne
	Security				Acqui	ired						Follo
					(A) or	r						Repo
					Dispo							Trans
					of (D))						(Instr
					(Instr.							
					4, and	d 5)						
				Code V	(A) ((D)	Date	Expiration	Title	Amount		
						· /	Exercisable	Date		or		
										Number		
										of		
										Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
TELLOCK GLEN E 1725 SHEPHERD RD CHATTANOOGA, TN 37421	Х								
Signatures									
Robert Taylor, attorney in fact Tellock	Е.	11/1	2/2008						
**Signature of Reporting Pe		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) Shares were issued in payment of the reporting person's quarterly Director fee retainer.

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.