## Edgar Filing: GERONO GAIL A - Form 4

GERONO G	AIL A										
Form 4											
March 30, 20	09										
FORM	4								OMB AF	PROVAL	
	UNITEL	) STATES		ITIES A hington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer									Expires:	January 31, 2005	
subject to STATEMENT OF CHANGES IN BENEFICI					CIA	AL OWNERSHIP OF Estimated average					
Section 1		SECURITIES							burden hours per		
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5	
obligation	<sup>18</sup> Section 17						-	1935 or Sectior	ı		
may conti <i>See</i> Instru	inue.			vestment	•	· ·			•		
1(b).	letion				I	5					
(Print or Type R	Responses)										
1. Name and Address of Reporting Person *       2. Issuer Name and Ticker or Trading       5. Relationship of						Reporting Pers	son(s) to				
GERONO GAIL A Symbol								Issuer			
			GON CARBON PORATION [CCC]				(Check all applicable)				
(Last)	(First)	(Middle)		Earliest Tra	ansaction			Director X Officer (give		Owner er (specify	
P.O. BOX 717 (Month/ 03/27/			03/27/20	-				below) Vice President			
11012011											
				endment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mon				th/Day/Year)	)			Applicable Line) _X_ Form filed by One Reporting Person			
PITTSBURG	GH, PA 15230-	0717						Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security	2. Transaction Da (Month/Day/Year		ned	3. Transactio	4. Securi	ties Ad	cquired	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of	
(Instr. 3)		any (Month/I	any (Month/Day/Year)		Code (Instr. 3, 4 and 5) (Instr. 8)			Owned Following	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock (1)	03/27/2009			F	217	D	\$ 14.17	21,466	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)

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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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
GERONO GAIL A									
P.O. BOX 717 Vice President									
PITTSBURGH, PA 1:	5230-0717								
Signatures									
Dennis M. Sheedy	03/30	)/2009							
<u>**</u> Signature of Reporting Person	Da	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) Disposition of shares to Company to pay withholding on vesting of restricted shares.

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.