Edgar Filing: EDWARDS A G INC - Form 4

| EDWARDS | A G INC | | | | | | | | | | |
|---|---|---|---|--|------------------------------|---|--|------------------------|---|--|--|
| Form 4 | | | | | | | | | | | |
| April 12, 200 |)6 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | OMB APPROVAL | | |
| Washington, D.C. 20549 | | | | | | OMB Number: | 3235-0287 | | | | |
| Check thi if no long | or | | | | | | | Expires: | January 31, 2005 | | |
| subject to | t to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O | | | | | | NERSHIP OF | Estimated a | Estimated average | | |
| Section 1 | | SECURITIES | | | | | | | burden hours per response 0.5 | | |
| Form 4 or Form 5 | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | | | | | | | 0.5 | | |
| obligation | ¹⁸ Section 17 | | | | | | of 1935 or Sectio | n | | | |
| may cont See Instru | inue. | | he Investment | • | · · | | | | | | |
| 1(b). | | | | | | | | | | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| CARTER EUGENE E Sy | | | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| | | | WARDS A G | INC [A | GE] | | (Check all applicable) | | | | |
| (Last) | 3. Date of Earliest Transaction (Month/Day/Year) 04/11/2006 | | | | | | | | | | |
| | | | | | X_ Director Officer (give | | b Owner er (specify | | | | |
| | | | | | below) below) | | | | | | |
| III III OL | (Street) | 4 I | f Amendment D | te Origina | 1 | | 6 Individual or I | oint/Group Filiu | og(Check | | |
| | (bucct) | I. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) | | | | | |
| _X_ Form filed by O | | | | | | | One Reporting Person | | | | |
| ST. LOUIS, | MO 63103 | | | | | | Form filed by M Person | Aore than One Re | eporting | | |
| (City) | (State) | (Zip) | Table I - Non-I | Derivative | Securi | ities Ac | quired, Disposed of | f, or Beneficial | lly Owned | | |
| 1.Title of | 2. Transaction Dat | e 2A. Deemed | 3. | , if Transaction(A) or Disposed of Code (D) | | | 5. Amount of | (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Security | (Month/Day/Year) | | | | | | Securities | | | | |
| (Instr. 3) | | any (Month/Day/ | | | | | - | | | | |
| | | | | | | | Following | | | | |
| | | | | | (A) | | Reported Transaction(s) | | | | |
| | | | | | or | р. | (Instr. 3 and 4) | | | | |
| | | | | Amount | | Price \$ | | | | | |
| common | 04/11/2006 | | S | 5,000 | D | 5 1.5 | 253,930 | 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. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | Expiration D (Month/Day, e | | | le and int of :lying ities 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|----------------------------------|--------------------|-------|---|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | | |
|--|------|---------------|-----------|---------|-------|--|--|--|--|
| | | Director | 10% Owner | Officer | Other | | | | |
| CARTER EUGENE E ONE NORTH JEFFERSON AV ST. LOUIS, MO 63103 | ENUE | X | | | | | | | |
| Signatures | | | | | | | | | |
| Gabriel Vuagniaux 04/12 By POA | | 006 | | | | | | | |
| <u>**</u> 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).

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.