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ABX AIR I Form 4 June 21, 20												
FORM	ЛЛ									PPROVA	L	
	UNITED	STATES S		RITIES A			NGE	COMMISSIO	N OMB Number:	3235-	0287	
Check t if no lot subject Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	nger to 16. or Filed put ons ntinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940									Expires: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type	e Responses)											
1. Name and Address of Reporting Person <u>*</u> GEARY JOHN D			2. Issuer Name and Ticker or Trading Symbol ABX AIR INC [ABXA]				g	5. Relationship of Reporting Person(s) to Issuer				
(Last)		3. Date of Earliest Transaction					(Check all applicable)					
(Last) (First) (Middle) C/O ABX AIR, INC., 145 HUNTER DRIVE			(Month/Day/Year) 06/17/2005					X_ Director 10% Owner Officer (give titleOther (specify below) below)				
		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting							
WILMINC	GTON, OH 45177							Person	More than One K	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivativ	e Securi	ties A	cquired, Disposed	of, or Beneficia	lly Owned	1	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution E any (Month/Day	Date, if	3. Transactio Code (Instr. 8) Code V	Dispose (Instr. 3	(A) or d of (D) , 4 and 5) (A) or) Price		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownershi (Instr. 4)	1	
Reminder: Re	eport on a separate lind	e for each clas	ss of sec	urities bene	Pers info requ disp	sons wh rmation lired to l	o res cont respo	or indirectly. Spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

 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. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	nof Derivative	Expiration Date	Underlying Securities 1
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	8)	Acquire (A) or Dispose (D) (Instr. 3 and 5)	ed of				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units (1)	<u>(4)</u>	06/17/2005		А		6,400		12/31/2007 <u>(2)</u>	(3)	Common Stock	6,400

Reporting Owners

Reporting Owner Name / Address		Relationsh		
	Director	10% Owner	Officer	Other
GEARY JOHN D C/O ABX AIR, INC. 145 HUNTER DRIVE WILMINGTON, OH 45177	Х			
Signatures				
W. Joseph Payne for: John D. Geary		06/21/2005		
**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) The restricted stock units may be converted to an equal number of shares of common stock or, if Mr. Geary so elects, cash equal to the fair market value of that number of shares of common stock.
- (2) While the restriction period ends on 12/31/2007, the restricted stock units will not be settled until Mr. Geary's board service ends.
- (3) There is no expiration date.
- (4) The restricted stock units will be exchanged for common stock on a one-for-one basis.

Remarks:

POA on file.

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.