VENEGONI JOHN V Form 4

April 15, 2010

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005 Estimated average

burden hours per response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

Common

Common

Common

Stock

Stock

Stock

04/13/2010

04/13/2010

(Print or Type Responses)

1. Name and Address of Reporting Person * VENEGONI JOHN V			2. Issuer Name <b>and</b> Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer			
			PAN CO [S	-		(Che	ck all applicable	e)	
(Last)	(First)	(Middle) 3. Da	te of Earliest	Transaction					
		(Mor	th/Day/Year)			Director		6 Owner	
22 W. FRONTAGE ROAD			04/13/2010			_X_ Officer (give title Other (specify below)			
						VP/	GM Surfactants	3	
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
		Filed	(Month/Day/Ye	ear)		Applicable Line) _X_ Form filed by	One Reporting Pe	erson	
NORTHFI	ELD, IL 60093					Form filed by Person	More than One Re	eporting	
(City)	(State)	(Zip)	Гable I - Non	-Derivative Se	curities Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of	2. Transaction Da	e 2A. Deemed	3.	4. Securities	Acquired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year	Execution Date	if Transact	ion(A) or Dispo	osed of (D)	Securities	Ownership	Indirect	
(Instr. 3)		any	Code	(Instr. 3, 4 a	nd 5)	Beneficially	Form: Direct	Beneficial	
		(Month/Day/Ye	ar) (Instr. 8)			Owned	(D) or	Ownership	
						Following	Indirect (I)	(Instr. 4)	
				(	<b>A</b> \	Reported	(Instr. 4)		
					A)	Transaction(s)			
			Code V	J Amount (I	Or D) Price	(Instr. 3 and 4)			

Code V

M

S

Amount (D)

D

2,000

2,000

(1)

(1)

Price

26.25

60.49

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

SEC 1474

(9-02)

26,228.9648

24,228.9648

1,000

D

D

I

By self as

custodian

for child

#### Edgar Filing: VENEGONI JOHN V - Form 4

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. Transac Code (Instr. 8	5. Number stion Derivative Securities 3) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercis Expiration Dat (Month/Day/Y	e	7. Title and A Underlying S (Instr. 3 and	Securities
				Code '	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option	\$ 26.25	04/13/2010		M	2,000 (1)	02/14/2008	02/13/2016	Common Stock	2,000

#### **Reporting Owners**

Reporting Owner Name / Address	Relationship
Reporting Owner Name / Address	

Director 10% Owner Officer Other

VENEGONI JOHN V 22 W. FRONTAGE ROAD NORTHFIELD, IL 60093

VP/GM Surfactants

### **Signatures**

John V. Venegoni 04/15/2010

\*\*Signature of Date
Reporting Person

# **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) Transaction completed pursuant to a 10b5-1 trading plan.

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.

Reporting Owners 2