SCHMIDT GARY P

Form 4

November 18, 2009

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SCHMIDT GARY P			2. Issuer Name and Ticker or Trading Symbol Alberto-Culver CO [ACV]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(energian approacie)		
745 WHITE W	TILLOW BA	ΛY	(Month/Day/Year) 11/17/2009	Director 10% OwnerX Officer (give title Other (specify below) Sr. VP, Gen. Coun. & Sec.		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
PALATINE, II	L 60067		Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tab	le I - Non-	Derivative	Secur	ities Acqui	red, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit corr Dispos (Instr. 3, 4	ed of	` ′	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	11/17/2009		M	28,592	A	\$ 20.305	56,051	D	
Common Stock	11/17/2009		S	28,592	D	\$ 29	27,459	D	
Common Stock	11/18/2009		M	9,058	A	\$ 20.305	36,517	D	
Common Stock	11/18/2009		S	9,058	D	\$ 29	27,459	D	
Common Stock							12,994	I	FN 1 (1)

Edgar Filing: SCHMIDT GARY P - Form 4

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.

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 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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day,	Pate	7. Title and 2. Underlying \$ (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to buy)	\$ 20.305	11/17/2009		M	28,592	(2)	09/30/2016	Common Stock	28,592
Employee Stock Option (Right to buy)	\$ 20.305	11/18/2009		M	9,058	(2)	09/30/2016	Common Stock	9,058

Reporting Owners

Reporting Owner Name / Address	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

SCHMIDT GARY P

745 WHITE WILLOW BAY Sr. VP, Gen. Coun. & Sec.

PALATINE, IL 60067

Signatures

/s/James M. Spira as attorney-in-fact for Gary P. Schmidt 11/18/2009

**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).

Reporting Owners 2

Edgar Filing: SCHMIDT GARY P - Form 4

- (1) Held in the 401(k) and Profit Sharing Sharing Plan. Represents Eaquivalent Shares calculated by taking the account balance divided by the closing stock price as of November 17, 2009 of \$29.00.
- (2) This option is fully vested.

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.