SHC CORP Form 4 April 16, 2001

FORM 4

WASHINGTON, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

// CHECK THIS BOX IF NO
LONGER SUBJECT TO SECTION

16. FORM 4 OR FORM 5
OBLIGATIONS MAY CONTINUE.
SEE INSTRUCTION 1(b).

FILED PURSUANT TO SECTION 16(a) OF THE SECURITIES EXCHANGE ACT OF 1934, SECTION 17(a)
HOLDING COMPANY ACT OF 1935 OR SECTION 30(f) OF THE INVESTMENT COMPANY A

1. NAME AND ADDRESS OF REPORTING PERSON*				ISSUER NAME AND SYMBOL	TICKER OR TRADING			RELATIONS (Check al
Donati Terrer	nce L.			C Corp.				X Direct X Office
(Last)	(First)			IRS OR SOCIAL SECURITY NUMBER OF REPORTING PERSON, IF AN ENTITY (VOLUNTARY)	4.	STATEMENT FOR MONTH/YEAR		
	vd., Suite 450							INDIVIDUA (CHECK API
(Street)			-			IF AMENDMENT, DATE OF ORIGINAL (MONTH/YEAR)		 Form
	IL							
	(State)				TA	BLE 1 - NON-DERI BENEFICIALLY OW		VE SECURI
1. TITLE OF S (Instr. 3)	2. TRANSACTION DATE	ON 3.	TRANSACTION CODE	4.	SECURITIES ACQUIRED		AMOUNT OF	

(Instr. 8)

(Month/

Day/Year)

BENEFICIA

OWNED AT

END OF

MONTH

(A) OR

DISPOSED OF

3, 4, and 5)

(D) (Instr.

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					and 4)			
				(D)				
Common Stock		J						
J=shares delivered to	lender as collater	al for a loan t	o Donati.					
Reminder: Report on a separate the Form is filed by					directly or			
	(Print or Type Response)							
FORM 4 (CONTINUED)		VATIVE SECURITI UTS, CALLS, WAR						
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transactio		nsaction e				
			 Code	V	(A)			
No change since last filin	ng							

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Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr.5)		9. Number of Derivative Securities Beneficially Owned at End of Month		10.	Ownership of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	 11	
Title	Title	Amount or Number of Shares			(Instr. 4)				
Ex	planation of	Responses:							
**	Intention	al misstatement	-s o	r omissions of	facts	constitute		/s/ Terrence I	Donati

** Intentional misstatements or omissions of facts constitut Federal Criminal Violations. SEE 18 U.S.C. 1001 and 15 U.S.C. 78ff(a). /s/ Terrence L. Donati

Note: File three copies of this Form, one of which must be manually signed. If space provided insufficient, SEE Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are unless the form displays a currently valid OMB Number.