Edgar Filing: KEITH COMPANIES INC - Form 4

KEITH CON	MPANIES INC										
Form 4											
April 05, 20	05										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								B APPROVAL			
	UNITED	SIAIES		shington			INGE CO	UNIMISSION	OMB Number:	3235-0287	
Check th	is box		vva	sinington	, D.C. 20	1349				January 31,	
if no long		IENT O	F CHAN	IGES IN	BENEF	ICIA	LOWN	ERSHIP OF	Expires:	2005	
subject to Section 1	0			GES IN BENEFICIAL OWNER SECURITIES					Estimated average burden hours per		
Form 4 c									response 0.5		
Form 5	Filed pur	suant to S	Section 1	6(a) of th	e Securi	ties E	Exchange	Act of 1934,			
obligatio may con		a) of the	Public U	tility Hol	ding Cor	npan	y Act of	1935 or Section	l		
See Instr		30(h)	of the Ir	vestment	Compar	ny Ac	ct of 1940)			
1(b).											
(Print or Type]	Desponses)										
(I fint of Type)	(Kesponses)										
1. Name and A	Address of Reporting	Person *	2 Issue	r Name an d	1 Ticker or	Tradi	no	5. Relationship of 1	Reporting Pers	on(s) to	
NIELSEN I		-	Symbol	r Name and Ticker or Trading				Issuer			
			-	COMPA	NIES IN	СГ	KCI]				
(Last)	(First) (I	Middle)	3 Date o	f Earliest Ti	ransaction	-	-	(Check	all applicable)	
				Day/Year)	runsuetron			Director	10%	Owner	
C/O THE K	EITH COMPAN	IES,	04/01/2	-				X Officer (give		r (specify	
INC., 19 TH	ECHNOLOGY D	RIVE						below) Pres./Chie	below) f Operating Of	ficer	
	(Street)		4 If Ame	endment D	ate Origina	1					
				nendment, Date Original (onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
			× ×	2	·			_X_ Form filed by O			
IRVINE, C.	A 92618							Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)	T - 1.1	I. T. N		C	•	·		0	
		-					_	ired, Disposed of,		-	
1.Title of Security	2. Transaction Date (Month/Day/Year)			3. Transactio	4. Securi			5. Amount of Securities	6. Ownership	7. Nature of Indirect	
(Instr. 3)	(Wonth/Day/Tear)	any	I Date, II	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially	Form: Direct Benef		
× /			Day/Year)					Owned (D) or		Ownership	
								Following Reported	Indirect (I) (Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)	(11150.4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common									_		
Stock	04/01/2005			F	893	D	\$ 17.42	20,007	D		
Common							\$				
Stock	04/05/2005			S <u>(1)</u>	300	D	ф 17.235	19,707	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.

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 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
NIELSEN ERIC C C/O THE KEITH COMPANIES, INC. 19 TECHNOLOGY DRIVE IRVINE, CA 92618			Pres./Chief Operating Officer					
Signatures								

/s/ Eric C. 04/05/2005 Nielsen

<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).
- (1) The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 6, 2002.

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.