Edgar Filing: Hillstrom Tom - Form 4

Hillstrom Tor	m										
Form 4											
March 19, 20									0145 A		
FORM	4		C CECUD	TTIES A		• T T A N		COMMISSION	r	PPROVAL	
	- UNITE	DSIAIE		hington,			NGE	COMMISSION	OMB Number:	3235-0287	
Check this	s box		vv a5	iiiigtoii,	D.C. 20.	, - ,				January 31,	
if no longer STATEMENT OF CH				HANGES IN BENEFICIAL OWNERSHIP OF						Expires: 2005	
subject to Section 10								Estimated average burden hours per			
Form 4 or	•								response 0.5		
Form 5 obligation		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									
may conti				•	•	• •		f 1935 or Sectio	n		
See Instru	ction	30(h) of the Inv	vestment	Company	y Act	of 19	40			
1(b).											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Hillstrom Tom				2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
Timstrom Te	/111		Symbol Heritage	-Crystal	Clean In	c [H	CCII				
		AC11	-	-		c. [11	ccij	(Chec	ck all applicable	e)	
(Last)	(First)	(Middle)		Earliest Tra	ansaction			Director	100	6 Owner	
C/O HERITAGE-CRYSTAL			(Month/Day/Year) 03/17/2008					Officer (give title Other (specify			
CLEAN, IN	C., 2175 POI	NT						below) VP	below) of Operations		
BOULEVA	RD, SUITE 3	75							or operations		
	(Street)		4. If Amer	ndment, Dat	te Original			6. Individual or Jo	oint/Group Filin	ng(Check	
J			Filed(Mon	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
ELGIN, IL 6	50123								One Reporting Pe More than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction			3.	4. Securit			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Y	ear) Execut	ion Date, if	Transactio Code	onAcquired Disposed			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(Insu: 5)		-	/Day/Year)		(Instr. 3,		·	Owned	Indirect (I)	Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Drice	(Instr. 3 and 4)			
Common				Coue V	Amount	(D)	Price				
Stock								15,000	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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 on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 11.5	03/17/2008		А	5,631	03/17/2008	03/17/2018	Common Stock	5,631

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Hillstrom Tom C/O HERITAGE-CRYSTAL CLEAN, INC. 2175 POINT BOULEVARD, SUITE 375 ELGIN, IL 60123			VP of Operations				
Signatures							
/s/ Samuel C. Schlessinger, Attorney-in-Fact	03/19	9/2008					
**Signature of Reporting Person	Da	ate					
Explanation of Responses	s:						

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).

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.