Edgar Filing: ALLIANCE RESOURCE PARTNERS LP - Form 4

ALLIANCE R Form 4 July 06, 2006	RESOURCE	PARTNER	S LP							
•	Л							OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or					NERSHIP OF	burden hou	Estimated average burden hours per			
Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type Re	esponses)									
1. Name and Address of Reporting Person <u>*</u> NEAFSEY JOHN P			2. Issuer Name and Ticker or Trading Symbol ALLIANCE RESOURCE PARTNERS LP [ARLP]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/D) 1717 S. BOULDER 07/03/20 AVENUE, SUITE 600 07/03/20					nsaction		X_ Director 10% Owner Officer (give title Other (specify below) below)			
TULSA, OK	(Street) 4. If Amendment, Data Filed(Month/Day/Year)						oint/Group Filing(Check One Reporting Person More than One Reporting			
							Person			
(City)	(State)	(Zip)	Table	I - Non-De	rivative S	ecurities Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if			3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Unit				Code V	Amount	(D) Price	(Instr. 3 and 4) 30,400	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)

1. Title of	2.	3. Transaction Date		4.	5. Num	ber	6. Date Exer	cisable and	7. Title and A	Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti			Expiration D		Underlying S		Derivativ
Security	or Exercise		any	Code	Derivat	ive	(Month/Day/	Year)	(Instr. 3 and	4)	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securiti	ies					(Instr. 5)
	Derivative				Acquire	ed					
	Security				(A) or						
	,				Dispose	ed					
					of (D)						
					(Instr. 3	3 4					
					and 5)	, т ,					
					anu <i>S</i>)						
										Amount	
							_			or	
							Date	Expiration	Title	Number	
							Exercisable	Date	THE	of	
				Code V	(Λ)	(\mathbf{D})				Shares	
				Code v	(A)	(D)				Shares	
Phantom	(2)	07/02/2000			100		(1)	(3)	Common	100	(2)
unit	<u>(2)</u>	07/03/2006		A	166		(1)	(3)	unit	166	<u>(3)</u>

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Reporting Owners

Reporting Owner Name / Address		Relationsh	ips					
	Director	10% Owner	Officer	Other				
NEAFSEY JOHN P 1717 S. BOULDER AVENUE SUITE 600 TULSA, OK 74119	Х							
Signatures								
/s/ John P. Neafsey by Megan Cordle, pursuant to power of attorney dated August 26, 2002								

**Signature of 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) The Phantom units are to be settled in either cash or ARLP common units, at the election of the Compensation Committee, upon the reporting person's death or termination.
- (**2**) 1 for 1
- (3) Not applicable

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.

Date