ADAMS EXPRESS CO

Form 5

February 03, 2005

OMB APPROVAL FORM 5 **OMB**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if

no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Form 4 Transactions Reported

Reported

1(b).

| | Address of Reporting FO PHYLLIS O | Symbol | • | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
|-------------------|-----------------------------------|----------------------|--------------------------------|-----------------------|--|--|-------------------|--|--|
| | | ADAMS | MS EXPRESS CO [ADX] | | (Che | ck all applicable | e) | | |
| (Last) | (First) (M | (Month/D 12/31/20 | ay/Year) | Fiscal Year Ended | _X_ Director | 10% | Owner er (specify | | |
| 7 ST. PAU 1140 | L STREET, SUI | | | | below) | below) | | | |
| | (Street) | 4. If Amer | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Reporting | | | |
| | | Filed(Mon | th/Day/Year) | | (che | ck applicable line |) | | |
| BALTIMO | RE, MD 21202 | 2 | | | V E E'' II | 0 0 0 | | | |
| | | | | | _X_ Form Filed by Form Filed by Person | More than One R | | | |
| (City) | (State) (| Zip) Table | e I - Non-Deri | vative Securities Acc | quired, Disposed o | of, or Beneficial | lly Owned | | |
| 1.Title of | 2. Transaction Date | 2A. Deemed | 3. | 4. Securities | 5. Amount of | 6. Ownership | 7. Nature of | | |
| Security | (Month/Day/Year) | Execution Date, if | Transaction | Acquired (A) or | Securities | Form: Direct | Indirect | | |
| (Instr. 3) | | any | Code | Disposed of (D) | Beneficially | (D) or | Beneficial | | |
| | | (Month/Day/Year) | (Instr. 8) | (Instr. 3, 4 and 5) | Owned at end | Indirect (I) | Ownership | | |
| | | | | (4) | of Issuer's | (Instr. 4) | (Instr. 4) | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

12/27/2004

Â

Common

Stock

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.

\$ 13 528

Price

Fiscal Year

(Instr. 3 and 4)

D

(A)

or

(D)

Amount

28 (1)

SEC 2270 (9-02)

Â

3235-0362

January 31,

2005

1.0

Number:

Expires:

response...

Estimated average

burden hours per

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

J

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| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exerc | cisable and | 7. Titl | le and | 8. Price of |
|-------------|-------------|---------------------|--------------------|-------------|------------|---------------|-------------|---------|----------------|-------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transaction | Number | Expiration D | ate | Amou | ınt of | Derivative |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | rlying | Security |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Secur | ities | (Instr. 5) |
| | Derivative | | | | Securities | | | (Instr. | 3 and 4) | |
| | Security | | | | Acquired | | | | | |
| | | | | | (A) or | | | | | |
| | | | | | Disposed | | | | | |
| | | | | | of (D) | | | | | |
| | | | | | (Instr. 3, | | | | | |
| | | | | | 4, and 5) | | | | | |
| | | | | | | | | | Amount | |
| | | | | | | | | | | |
| | | | | | | Date | Expiration | T:41- | or Namelana | |
| | | | | | | Exercisable | Date | Title | Number | |
| | | | | | (A) (D) | | | | of | |
| | | | | | (A) (D) | | | | Shares | |

of D

В

Is Fi

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|------|--|--|
| Fg | Director | 10% Owner | Officer | Othe | | |
| BONANNO PHYLLIS O 7 ST. PAUL STREET | ÂΧ | Â | Â | Â | | |
| SUITE 1140 BALTIMORE, MD 21202 | | | | | | |

Signatures

Phyllis O.
Bonanno

**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) Reflects exempt acquisition as a result of dividend reinvestment.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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