

Edgar Filing: ATLAS MINERALS INC - Form 4

ATLAS MINERALS INC
 Form 4
 September 05, 2002

F O R M 4

U.S. SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

[X] Check this box if
 no longer Subject
 to Section 16.

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

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol		6. Relationship to Issuer	
Pension Benefit Guaranty Corporation			Atlas Minerals, Inc (ATMR)		Di	
(Last)	(First)	(MI)	3. IRS Identification Number of Reporting Person, if an entity (Voluntary)		4. Statement for Month/Year	
1200 K Street, N.W., Suite 870			--		September 2002	
(Street)					5. If Amendment, Date of Original (Month/Year)	
Washington	DC	20005			7. Indicate if this is a Form 4 (X) or Form 3	
(City)	(State)	(Zip)			---	

TABLE I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Mon/Day/Yr)	3. Transaction Code (Instr. 8)	4. Security Acquired (A) or Disposed of (D) (Instr. 3, 4 & 5)		5. Amount or Number of Securities (Instr. 3, 4 & 5)
			Amount	Price	
Common Stock	9/3/02	S	334,315	D \$0.248266	488,000

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Reminder: Report on a separate line for each class securities owned directly or indirectly.
*If the form is filed by more than one reporting person, see Instruction 4(b)(v).

FORM 4 (continued)

TABLE II - Derivative Securities Acquired, Disposed of, Beneficially (e.g., puts, calls, warrants, options, convertible security)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans-Date (Mon/Day/Year)	4. Tran-Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 & 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 & 4)	8. P- Der-
			Code V	(A) (D)	Date Exbl. Date	Title Amount or Number of Shares	(In

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Explanation of Responses:

Pension Benefit Guaranty
By: Pacholder Associates, Inc.

**Intentional misstatements or omissions of facts constitute Federal
Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

By: /s/ David A. Grosholz

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

**Signature of
David A. Grosholz
President and General Manager
for Pacholder Associates, Inc.
Agent for Pension Benefit Guaranty
Corporation

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