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	DUSTRIES INC										
Form 4 July 28, 200)5										
FORM	ЛЛ							OMB A	PPROVAL		
	UNITED S		RITIES A ashington			NGE C	COMMISSION	OMB Number:	3235-0287		
Check the if no lon subject to Section Form 4 co	states states states of st	ENT OF CHA	U	NERSHIP OF	Expires: Estimated a burden hou response	irs per					
Form 5 obligatio may con <i>See</i> Instr 1(b).	ons Section 17(a	suant to Section a) of the Public 30(h) of the	Utility Hol	ding Cor	npany	Act of	1935 or Section	1			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> RANKIN MATTHEW M			ier Name an I CO INDUS			-	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N		of Earliest T			NC]	(Check all applicable)				
NACCO IN	NDUSTRIES, INC BROOK DRIVE, S	(Month ., 5875 01/26/	/Day/Year)				below)	title 10% below) ber of a group			
MAYFIEL	(Street) D HEIGHTS, OH	Filed(M	nendment, D Ionth/Day/Yea	-	l		6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person	One Reporting Pe	erson		
(City)	(State)	(Zip) Ta	ble I - Non-l	Derivative	Secur	ities Aca	uired, Disposed of	or Beneficial	llv Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transacti Code) (Instr. 8)	3. 4. Securitie Transaction(A) or Disp Code (Instr. 3, 4 (Instr. 8)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Class A Common Stock (2)	01/26/2005	01/26/2005		532	(D) A	Price \$ 0	3,994	I	By Assoc II (1)		
Class A Common Stock (2)							1,037	I	By Assoc II/Spouse		
Class A Common Stock							10,587	I	By Trust (4)		
Class A	07/26/2005	07/26/2005	S	500	D	\$	3,500	D			

Reporting Pers

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112.6

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

Reporting Owners

Reporting Owner Name / Address

Common

Stock (2)

Reporting Owner Mane / Address				
	Director	10% Owner	Officer	Other
RANKIN MATTHEW M NACCO INDUSTRIES, INC. 5875 LANDERBROOK DRIVE, STE. 300 MAYFIELD HEIGHTS, OH 44124				Member of a group
Signatures				
/s/Constantine E. Tsipis, attorney-in-fact for Rankin	Mr.	07/2	8/2005	
**Signature of Reporting Person		E	Date	

Explanation of Responses:

*	If the form is filed by more than one reporting person, <i>see</i> 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)	Represents the Reporting Person's proportionate limited partnership interests in shares held by Rankin Associates II, L.P.
(2)	As a member of a "group" deemed to own more than 10% of an equity security as a result of being a party to a Stockholders' Agreement, dated as of March 15, 1990, beneficially owned by each of the signatories to such agreement (the "Agreement"), the Reporting Person disclaims beneficial ownership of any such shares of Stock owned by any other signatory to the Agreement.

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- (3) Represents the Reporting Person's spouse's proportionate limited partnership interests in shares held by Rankin Associates II, L. P. Reporting Person disclaims beneficial ownership of all such shares.
- (4) Held through a trust of which the Reporting Person is co-trustee with his father.

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.