

DICKERMAN JENNIFER  
Form 4  
November 14, 2005

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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 Responses)

1. Name and Address of Reporting Person \*  
DICKERMAN JENNIFER

2. Issuer Name and Ticker or Trading Symbol  
NACCO INDUSTRIES INC [NC]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
5875 LANDERBROOK DRIVE, SUITE 300  
(Street)

3. Date of Earliest Transaction (Month/Day/Year)  
09/22/2005

\_\_\_\_ Director  
\_\_\_\_ Officer (give title below)  Other (specify below)  
Sub Dir - Member of a Group

MAYFIELD HEIGHTS, OH 44124  
(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price
Class A Common Stock <sup>(1)</sup>					2,000	D	
Class A Common Stock <sup>(1)</sup>	09/22/2005	09/22/2005	G	V	200	D	\$ 0
Class A Common Stock <sup>(1)</sup>	09/22/2005	09/22/2005	G	V	51	D	\$ 0
Class A Common Stock <sup>(1)</sup>	09/22/2005	09/22/2005	G	V	209	D	\$ 0
						I	Trust (MET) <sup>(2)</sup>
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Stock <sup>(1)</sup>										
Class A Common Stock <sup>(1)</sup>	09/26/2005	09/26/2005	G V 31	D	\$ 0	3,200	I		Trust (MET) <sup>(2)</sup>	
Class A Common Stock <sup>(1)</sup>	09/26/2005	09/26/2005	G V 199	D	\$ 0	3,001	I		Trust (MET) <sup>(2)</sup>	
Class A Common Stock <sup>(1)</sup>	11/09/2005	11/09/2005	J		155,512 A \$ 0	158,513	I		Trust (MET) <sup>(2)</sup>	
Class A Common Stock <sup>(1)</sup>	11/09/2005	11/09/2005	S		8,000 D \$ 116.2064	150,513	I		Trust (MET) <sup>(2)</sup>	
Class A Common Stock <sup>(1)</sup> <sup>(3)</sup>						600	I		By Trust <sup>(4)</sup> <sup>(5)</sup>	

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.**

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(9-02)

**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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of 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)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Transaction (Instr. 6)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

## Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

DICKERMAN JENNIFER  
5875 LANDERBROOK DRIVE  
SUITE 300  
MAYFIELD HEIGHTS, OH 44124

Sub Dir - Member of a Group

## Signatures

/s/ Constantine E. Tsipis, attorney-in-fact for Jennifer  
Dickerman

11/10/2005

\_\_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) 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.

(2) Reporting Person serves as trustee of a revocable trust held for the benefit of Reporting Person's mother. Reporting Person disclaims beneficial ownership of all such shares

(3) 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 .

(4) Reporting Person succeeded her mother as Trustee (together with National City Bank of Cleveland) of such trusts, which are for the benefit of Reporting Person's children, nephews and nieces. Reporting Person disclaims beneficial ownership of all such shares.

(5) Reporting Person succeeded her mother as trustee (together with National City Bank of Cleveland) of such trusts, which are for the benefit of Reporting Person's children, nephews and nieces. Reporting Person disclaims beneficial ownership of all such shares.

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.