WHITTEMORE ANNE M

Form 4 May 13, 2011

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

Washington, D.C. 20549

January 31, Expires: 2005

Form 4 or Form 5 obligations STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response...

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person ** WHITTEMORE ANNE M			2. Issuer Name and Ticker or Trading Symbol ALBEMARLE CORP [ALB]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction	(Cili	ori un uppnouer	-,	
ONE JAMES	S CENTER		(Month/D 05/11/20	•		X Director Officer (giv below)	ve titleOth		
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year		Applicable Line) _X_ Form filed by	One Reporting P	erson	
RICHMONI	O, VA 23219					Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative Securities Ac	quired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security	2. Transaction (Month/Day/Y			3. Transaction	4. Securities onAcquired (A) or	5. Amount of Securities	6. Ownership Form: Direct	7. Nature Indirect	

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
			Code V	Amount	(A) or (D) Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)
Common Stock						16,023 (1)	D	
Common Stock						700	I	Shares held by spouse

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

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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. Transactic Code (Instr. 8)	Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4,		ansaction Derivative Expiration Date de Securities (Month/Day/Year) str. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Prid Deriv Secur (Instr
Phantom Stock	<u>(2)</u>	05/11/2011	Code V	(A) (D) 1,200 (3)	Date Exercisable	Expiration Date	Title Common Stock	Amount or Number of Shares	\$ 69	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WHITTEMORE ANNE M ONE JAMES CENTER RICHMOND, VA 23219	X						

Signatures

/s/ Karen G. Narwold, Attorney o5/13/2011

**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) Number of shares adjusted to correctly reflect purchases made by ALB Dividend Reinvestment Plan.
- (2) Phantom Stock units convert 1 for 1 into common stock.
- (3) Share represents 2011 installment of non-employee director's stock compensation pursuant to Non-Employee Director Stock Plan.
- (4) Exercisable in one lump sum on the February 15 of the calendar year after the year Ms. Whittemore is no longer a director.
- (5) No expiration date.

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.

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