Edgar Filing: MCGUIRE THOMAS R - Form 4

| MCGUIRE T | HOMAS R | | | | | | | | | | |
|--|---|----------------------|---|---|----------------------------------|--|------------|---|--|-----------|--|
| Form 4 | | | | | | | | | | | |
| July 06, 2011 | | | | | | | | | | PPROVAL | |
| FORM | 4 UNITE | CD STATES | | | | | NGE (| COMMISSION | | 3235-0287 | |
| Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940 | | | | | Expires:January 312005Estimated averageburden hours perresponse0.5 | | | | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> MCGUIRE THOMAS R | | | 2. Issuer Name and Ticker or Trading Symbol COAST DISTRIBUTION SYSTEM INC [CRV] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First) (Middle) 350 WOODVIEW AVENUE | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/05/2011 | | | | | X DirectorX 10% Owner X Officer (give title Other (specify below) below) Executive Chairman | | | |
| | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| MORGAN F | 11LL, CA 950 |)37 | | | | | | Person | | 1 8 | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | Securi | ties Aco | quired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction 1 (Month/Day/Yo | ear) Executio any | on Date, if | 3. Transactic Code (Instr. 8) Code V | on(A) or Di (D) (Instr. 3, | 4 and (A) or | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 07/05/2011 | | | S | 1,001 | D | \$ 3.02 | 493,482 | D | | |

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) | | ate | 7. Title Amoun 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 | (Instr. 3, 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Addres | ss | Relationships | | | | | | |
|--|------------|---------------|--------------------|-------|--|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | | |
| MCGUIRE THOMAS R 350 WOODVIEW AVENUE MORGAN HILL, CA 95037 | | Х | Executive Chairman | | | | | |
| Signatures | | | | | | | | |
| /s/ Thomas R. McGuire | 07/06/2011 | | | | | | | |
| <u>**</u> 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).

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.