Edgar Filing: BECKER MARC - Form 4

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Form 4											
	arch 13, 2009 FORM 4 LINUTED STATES SECURITIES AND EXCHANCE COMMI							OMB APPROVAL			
UNITED STATES S				SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					3235-0287		
Check th if no long subject to Section 1 Form 4 c	ger STATE 16.	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
Form 5 obligatio may cont <i>See</i> Instr 1(b).	ns Section 1'	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 l	Responses)										
1. Name and Address of Reporting Person <u>*</u> BECKER MARC			2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
			QUALITY DISTRIBUTION INC [QLTY]				(Check all applicable)				
(Last) (First) (Middle) C/O APOLLO MANAGEMENT, L.P., 9 WEST 57TH STREET, 43RD FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 03/11/2009			X_ Director10% Owner Officer (give titleOther (specify below) below)					
				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				
NEW YOR	K, NY 10019						Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deem (Month/Day/Year) Execution any (Month/Da		Date, if TransactionAcquired (A) or Code Disposed of (D) ay/Year) (Instr. 8) (Instr. 3, 4 and 5) (A)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code V	Amount	or (D) Price	(Instr. 3 and 4)				
Reminder: Rep	oort on a separate li	ne for each c	lass of sec	urities bene	ficially ow	ned 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)

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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. Transactio Code (Instr. 8)	orDerivative Securities (A) or Dis (D)	curities Acquired (Month/Day/Year)) or Disposed of		7. Title and Amount Underlying Securitie (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shar
Stock Option (right to buy)	\$ 17	03/11/2009		D		20,000	(2)	11/12/2013	Common Stock	20,00
Stock Option (right to buy)	\$ 1.25	03/11/2009		A	20,000		(3)	03/11/2019	Common Stock	20,00

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
BECKER MARC C/O APOLLO MANAGEMENT, L.P. 9 WEST 57TH STREET, 43RD FLOOR NEW YORK, NY 10019	Х					
Signatures						
/s/ Jonathan C. Gold, by power of attorney	03/13/2009					
<pre>Signature of Reporting Person</pre>		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).

On March 11, 2009, Quality Distribution, Inc. (the "Company") canceled an option to purchase 20,000 shares of Common Stock of the
 Company granted to Mr. Becker on November 13, 2003. Mr. Becker received a replacement option to purchase 20,000 shares of Common Stock of the Company having an exercise price equal to the closing market price of the underlying stock on March 11, 2009.

(2) The canceled option provided for vesting in four equal annual installments beginning on November 14, 2004.

(3) The option vests in four equal annual installments beginning on March 11, 2010.

Remarks:

Mr. Becker is associated with Apollo Management, L.P. (?Management?) and its affiliated investment managers. Management

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.