#### Edgar Filing: FIORENZA DAVID A - Form 4/A

FIORENZA Form 4/A	A DAVID A											
August 17,	2011											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									APPROVAL			
Check this hav								Number:	3235-0287			
Check this box if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Expires:	January 31, 2005				
subject to STATEMENT OF CHANGES IN BENE Section 16. SECURITIES Form 4 or							FICI	AL UW.	Estimate burden h response	•		
Form 5 obligation may con <i>See</i> Inst 1(b).	ons ntinue. Section 17(	(a) of the l	Public U	Jtility I	Hol	lding Co	mpa	•	e Act of 1934, f 1935 or Sectio 40	on		
(Print or Type	Responses)											
FIORENZA DAVID A Symbol				suer Name <b>and</b> Ticker or Trading ol VMARKET CORP [NEU]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (	Middle)	3. Date of Earliest Transaction				(Cne	ck all applica	ble)			
(Month/ 330 SOUTH FOURTH STREET 08/15/				n/Day/Year) /2011					Director 10% Owner X Officer (give title Other (specify below) below) Vice President and Treasurer			
				Amendment, Date Original (Month/Day/Year) 7/2011					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
RICHMOND, VA 23219									Person			
(City)	(State)	(Zip)	Tal	ble I - N	on-	Derivativ	e Seci	urities Acq	uired, Disposed o	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr. 3, 4 and 5) (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	08/15/2011 <u>(1)</u>			А		315 <u>(2)</u>	А	\$0	595	D		
Common Stock	08/15/2011 <u>(1)</u>			F		101	D	\$ 158.48	494	D		
Common Stock									4,366.17	Ι	NewMarket Savings Plan $(3)$	

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

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# 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				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				
FIORENZA DAVID A 330 SOUTH FOURTH STREET RICHMOND, VA 23219			Vice President an Treasurer	ıd				
Signatures								
/s/ M. Rudolph West (by POA for Da Fiorenza)	avid	08/17/201	1					
**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) This Form 4/A is being filed to correct the transaction dates in box 2 on the original filing.
- The Compensation Committee of the Board of Directors of NewMarket Corporation (the "Company") approved stock awards to be
   (2) granted on August 15, 2011 (the "Award Date") pursuant to the Company's 2004 Incentive Compensation and Stock Plan. The stock vests immediately on the Award Date and may not be sold or otherwise transferred until August 15, 2012.
- (3) The increase in shares is due to periodic purchases by the Plan Trustee pursuant to the Plan.

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.