## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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 OWN STATEMENT OF CHANG

	d Address of	Reporting Person* VID G				AR'	ΓIN N		er or Trad ETTA		Symbol ATERIA	LS	INC			all app		g Person	10% C	wner
(Last) 2710 WY	(Fii CLIFF RO	,	Middle)		3. D			t Transa	action (M	onth/I	Day/Year)					Offic belov	er (give title w)		Other below)	(specify
(Street) RALEIG (City)			27607 Zip)		4. If	Ame	endment,	Date of	f Original	Filed	(Month/Da	ay/Ye	ar)		. Indiv ine) X	Forn	r Joint/Group n filed by One n filed by Mor on	e Reportir	ng Pers	on
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date			2. Transa Date (Month/D	Execut Day/Year) if any		A. Deemed Execution Date, f any Month/Day/Year)				ies Acquired (A) Of (D) (Instr. 3, 4			4 and Second Sec		icially d Following	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			action(s) 3 and 4)			(IIISU. 4)
Common	Stock			09/30	/2009				A		68		A	\$73	.66		5,657	D		
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. Deem Execution if any (Month/Da	ay/Year)	4. Transa Code (I 8)			ative rities ired osed	6. Date E Expiratio (Month/D	n Date	е	Ame Sec Und Deri	Am or Nu of				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Form Direc or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

/s/ Roselyn Bar, attorney-in-

fact

\*\* Signature of Reporting Person

Date

10/01/2009

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

- $^{\star}$  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.

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 Number.