## Edgar Filing: ATLAS AIR WORLDWIDE HOLDINGS INC - Form 4

ATLAS AII Form 4 May 22, 20	R WORLDWIDE	HOLDIN	GS INC	C						
FORM	ЛЛ							-	PPROVAL	
	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-02	87
Check t if no lor subject Section Form 4 Form 5 obligation may con See Inst	rsuant to So (a) of the P	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					Estimated burden hou response	Estimated average burden hours per response 0.5		
1(b).	ruction	. ,			1	2				
(Print or Type	Responses)									
1. Name and BERNLOF		2. Issuer Name <b>and</b> Ticker or Trading Symbol ATLAS AIR WORLDWIDE HOLDINGS INC [AAWW]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)		3. Date of Earliest Transaction (Month/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify below) below)					
2000 WESTCHESTER AVEUNE (Street)			05/21/2008 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				
PURCHAS	SE, NY 10577						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivativ	e Securities	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Dispose (Instr. 3	d (A) or d of (D) , 4 and 5) (A) or	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	port on a separate line	e for each cla	ss of sec	urities bene	ficially ov	wned directly	or indirectly.			
					Pers infor requ	ons who re mation con ired to resp lays a curre	espond to the colle nation in this form bond unless the fo ently valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(Ins	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	(1)	05/21/2008		А		1,575		(2)	(2)	Common Stock	1,575	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BERNLOHR TIMOTHY J 2000 WESTCHESTER AVEUNE PURCHASE, NY 10577	Х						
Signatures							
/s/ Michael W. Borkowski as Attorney-in-Fact		05/22	2/2008				
**Signature of Reporting Person		D	ate				

## **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) (1) Upon payout, the Reporting Person is entitled to receive one share of Common Stock for each one Restricted Stock Unit.

(2) The units vest in their entirety on the first to occur of the following: (i) the first anniversary of the Date of Grant; (ii) the day immediately preceding the date of the annual meeting of stockholders of the Company occurring in 2009; the day immediately preceding

(2) the Reporting Person's death; the day immediately preceding the date of termination of the Reporting Person's service on the Board by reason of disability (as defined); or a Change in Control of the Company (as defined). Share payouts will be made as soon as practicable after vesting of the Restricted Stock Units.

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.